

**EMPLOYMENT APPLICATION**

The following information is requested to help us make the best possible placement of employees within the company. All portions of this application pertaining to you must be completed. We appreciate the time you spend completing this application. The employer, in accordance with state and federal laws does not discriminate on the basis of age, race, religion, color, sex, national origin, ancestry, disability, or any other characteristic protected by law.

**PLEASE PRINT**

**NAME:** \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)

**ADDRESS:** \_\_\_\_\_  
(STREET) (CITY) (STATE) (ZIP)

**HOME PHONE:** \_\_\_\_\_ **WORK PHONE:** \_\_\_\_\_

**POSITION APPLIED FOR:** \_\_\_\_\_

**TYPE OF EMPLOYMENT:** Full Time: \_\_\_ Part-Time: \_\_\_ Temporary: \_\_\_ Split Shift, Tues- Sat. \_\_\_

**Shift applying for:** Days 8-4:30 M-F \_\_\_ Evenings 4:30 -8:30 & Sat 9-1:00 (extended summer hrs) \_\_\_

**DAYS REQUESTING TO WORK:** M \_\_\_ TUE \_\_\_ WED \_\_\_ THU \_\_\_ FRI \_\_\_ SAT \_\_\_ SUN \_\_\_

**COMMENTS:** \_\_\_\_\_

**HAVE YOU EVER WORKED FOR US BEFORE?** Yes \_\_\_ No \_\_\_ If yes, indicated dates: \_\_\_\_\_

**WHO REFERRED YOU TO US?** \_\_\_\_\_

**EMPLOYMENT RECORD** (Please account for all time over the past five years, listing most recent job first. Use additional sheets if necessary)

DATE OF EMPLOYMENT	NAME/ADDRESS OF EMPLOYER AND NAME OF SUPERVISOR	JOB TITLE AND RESPONSIBILITIES	REASON FOR LEAVING
From: _____ ___ To: _____ Phone: _____			
From: _____ ___ To: _____ Phone: _____			
From: _____ ___ To: _____			

_____ Phone: _____			
From: _____ ___ To: _____ Phone: _____			
From: _____ ___ To: _____ Phone: _____			

Please indicate by number the employees we may NOT contact and the reason: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

	<b>SCHOOL</b>	<b>NO. OF YEARS ATTENDED</b>	<b>DEGREE</b>	<b>MAJOR</b>
<b>HIGH SCHOOL</b>				
<b>COLLEGE</b>				
<b>OTHER</b>				

List special training, certificates, or licenses you have relative to the job to which you are applying.

\_\_\_\_\_

\_\_\_\_\_

List any job-related professional associations in which you participate. DO NOT INCLUDE ANY ASSOCIATIONS THAT WOULD IDENTIFY AGE, RACE, COLOR, SEX, NATIONAL ORIGIN, OR RELIGION.

If you are hired, when can you begin work? \_\_\_\_\_

If hired, can you show proof of legal authorization to work? Yes \_\_\_ No \_\_\_ Are you at least 18 years of age? Yes \_\_\_ No \_\_\_ If under the age of 18, can you produce a work permit upon hire? Yes \_\_\_ No \_\_\_ Do you have reliable transportation to and from work? Yes \_\_\_ No \_\_\_ Do you have any convictions as an adult? A conviction will not Yes \_\_\_ No \_\_\_ necessarily disqualify you from

employment.

**PLEASE READ ALL OF THE FOLLOWING BEFORE SIGNING**

I certify that the information shown on this application is correct and complete to the best of my knowledge, and that I have not knowingly withheld any fact or circumstance. I understand that falsifying or omitting information on this form may cause me to be disqualified from further consideration or dismissed from employment.

All employment offers are made contingent upon satisfactory proof of legal authorization to work in the United States according to law. I understand that failure to provide satisfactory proof of identity and authorization to work in the United States will disqualify me from employment.

I understand that if hired, my status will be that of an employee at will, with no contractual right, express or implied, to remain employed. In consideration of my employment, I specifically agree that my employment may be terminated, with or without cause or notice, at any time, at the option of either the employer or myself. I understand that no one other than the owner of the company, in writing, may enter any agreement for employment on my behalf or make any agreement contrary to the foregoing.

I authorize the employer to investigate, confirm, and supplement any information contained in this application and to contact my former employers unless otherwise stated below.

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**APPLICANT'S SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_