Application for Employment

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Position Applying For:	Date of Application:		
Advertisement	low Did You Learn About Us? (circle) Relative Inquiry Employment Agency Friend Other:		
	Personal Inform		
First Name:	Last Name:		_ Middle Initial:
Address:	City:	State:	Zip:
Telephone Number:		Date of Birth:	
1. Best Time to Contact You 2.Have you ever filed an app			PM YES NO
If yes, give date			
3.If you are under 18 years of work?YES	of age, can you provide r	equired proof of	your eligibility to
4.Have you ever been emplo	oyed with us before?	YE	S NO
4a.If yes, give date			
5.Do any of your friends or r	elatives other than spou	se work here?	YES NO
6.Are you currently employe	ed?YE	S NO	
7.May we contact your pres	ent employer?	YES	NO
8.Are you prevented from la Immigration status?		ed in this country	y because of a VISA or
9.Date Available for work: _	//		
10.What is your desired sala	ary range?		
11.Are you available to worl	k? Full Time (40 hours	/week) Part 1	lime (< 40 hours/week)
Temporary	.Dates Available:		
12.Are you currently on "lay	-off" status and subject t	o recall?	YES NO
13.Can you travel if a job red	quires it?	YES NO	

Education	Name & Address of School	Course of Study	Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				

EMPLOYMENT EXPERIENCE: Start with your present or last job, include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race; color; religion; gender; national origin; disabilities or other protected status.

1.Employer		Dates En	nployed	Work Performed
Address		From	То	
Phone Number		Hou Rate/S		
Job Title	Supervisor	Starting:		
Reason for Leaving		Final:		
2.Employer		Dates En	nployed	Work Performed
Address		From	То	
Phone Number		Hou Rate/S	-	
Job Tide	Supervisor	Starting:		
Reason for Leaving		Final:		
3.Employer		Dates En	nployed	Work Performed
Address		From	То	
Phone Number		Hou Rate/Sa		
Job Title	Supervisor	Starting:		
Reason for Leaving	1	Final:		
Employer		Dates En	nployed	Work Performed
Address		From	То	

State. any additional information you feel may be helpful to us in considering you	r
application.	

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN
INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.
Are you capable of performing in a reasonable manner, with or without a reasonable

Are you capable of perfor	ming in a	a reasonable manner, with or without a reasonable
accommodation, the activ	ities invo	olved in the job or occupation for which you have
applied?	YES	NO

A review of activities involved in such job or occupation has been given?.....YES NO

GIVE THREE REFERENCES OF THREE PERSONS NOT RELATED TO YOU			
1.	NAME:	PHONE:	
2.	NAME:	PHONE:	
3.	NAME:	PHONE:	

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are still being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written documentation or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment I understand that false or misleading information given in my application or interview may result in discharge, I understand, also, that I am required to abide by all rules and regulation of the employer.

Signature of Applicant: _____

Date: _____

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.