

APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, and will not permit discrimination on the basis of race, color, sex, age, national origin, ancestry, religion, citizenship, veteran status, marital status, sexual orientation or disability. Employment related decisions, such as hiring, promotion, training, and discipline will be made for legitimate business reasons based upon qualifications and other non-discriminatory factors. We further comply with all federal, state, and local laws, rules and regulations pertaining to equal employment opportunity.

PLEASE PRINT

Today's Date: _____

Position(s) Applied for: _____

Desired Salary: _____

Last Name: _____

First: _____

Middle: _____

Address: _____

Email Address: _____

City: _____

State: _____

ZIP Code: _____

Telephone: _____

Social Security Number: _____

Do you have a legal right to work in the US? Yes No

Have you been convicted of a crime other than a minor traffic violation? Yes No

If yes, please explain: _____

Are you willing to work? Mark all that apply.

Full-time (40 or more hours each week)

Temporary

Evenings

Overnights

Part-time (Less than 40 hours each week)

Weekends

Holidays

Days

What date are you available to start? _____

Mark the days and hours of availability:

Day Monday Tuesday Wednesday Thursday Friday Saturday Sunday

From

To

Do you have any physical limitations that would prohibit you from performing any of the job functions with or without reasonable accommodations of the position(s) for which you are applying? Yes No

If yes, please specify: _____

Do you have any other names by which your records would be found? _____

EDUCATIONAL BACKGROUND:

	School Name	Location	# of Years Completed	Degree/ Diploma	Area of Study
High School					
College					
Other					

SKILLS AND QUALIFICATIONS:

EMPLOYMENT HISTORY: Please provide the following information for your past and current employers, assignments, and volunteer activities, starting with the most recent.

		Dates Employed	Work Performed
Employer		From	
Address		To	
Phone Number(s)	Hourly Rate or Salary		
Job Title		Starting \$	
Supervisor		Ending \$	
Reason for Leaving			

		Dates Employed	Work Performed
Employer		From	
Address		To	
Phone Number(s)	Hourly Rate or Salary		
Job Title		Starting \$	
Supervisor		Ending \$	
Reason for Leaving			

		Dates Employed	Work Performed
Employer		From	
Address		To	
Phone Number(s)	Hourly Rate or Salary		
Job Title		Starting \$	
Supervisor		Ending \$	
Reason for Leaving			

REFERENCES Other than friends or relatives, i.e. business associates.

Name	Address City, State & Zip	Phone	Occupation	Years Known

By signing this application, I declare the information provided by me is complete and true to the best of my knowledge. I understand that any misrepresentation or omission on this application may preclude an offer of employment or may result in a withdrawal of an employment offer, or may result in my discharge from employment if I am already employed at the time of misrepresentation or omission is discovered.

Applicant's Signature

Today's Date