



## Application for Employment

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

(PLEASE PRINT)

|                                            |        |                                   |      |                                      |             |                     |  |
|--------------------------------------------|--------|-----------------------------------|------|--------------------------------------|-------------|---------------------|--|
| Position(s) Applied For                    |        |                                   |      |                                      |             | Date of Application |  |
| How Did You Learn About Us?                |        |                                   |      |                                      |             |                     |  |
| <input type="checkbox"/> Advertisement     |        | <input type="checkbox"/> Friend   |      | <input type="checkbox"/> Walk-in     |             |                     |  |
| <input type="checkbox"/> Employment Agency |        | <input type="checkbox"/> Relative |      | <input type="checkbox"/> Other _____ |             |                     |  |
| Last Name                                  |        | First Name                        |      |                                      | Middle Name |                     |  |
| Address                                    | Number | Street                            | City |                                      | State       | Zip Code            |  |
| Telephone Number(s)                        |        |                                   |      | E-Mail Address                       |             |                     |  |

If you are under 18 years of age, can you provide required proof of your eligibility to work?

Yes  No

Have you ever filed an application with us before?

Yes  No

If Yes, give date \_\_\_\_\_

Have you ever been employed with us before?

Yes  No

If Yes, give date \_\_\_\_\_

Are you currently employed?

Yes  No

May we contact your present employer?

Yes  No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?

Yes  No

Proof of citizenship or immigration status will be required upon employment.

On what date would you be available for work?

\_\_\_\_\_

Are you available to work:  Full Time  Part Time  Shift Work  Temporary

Are you currently on “lay-off” status and subject to recall?  Yes  No

Can you travel if a job requires it?  Yes  No

Apart from religious observances, will you be able to work all other times?  Yes  No

If you have been provided with a job description of the desired position, please answer the following:

Can you perform the essential functions of the position with or without reasonable accommodation?  Yes  No

Have you ever been convicted of any violation of the law (other than a minor traffic violation) substantially related to the functions and responsibilities of the job for which you are applying? (Conviction will not necessarily disqualify an applicant from employment).  Yes  No

If Yes, please explain \_\_\_\_\_

## Education

|                                                                                                | Elementary School |   |   |   |   | High School |    |    |    | Undergraduate College/University |   |   |   | Graduate/Professional |   |   |   |
|------------------------------------------------------------------------------------------------|-------------------|---|---|---|---|-------------|----|----|----|----------------------------------|---|---|---|-----------------------|---|---|---|
| School Name and Location                                                                       |                   |   |   |   |   |             |    |    |    |                                  |   |   |   |                       |   |   |   |
| Years Completed                                                                                | 4                 | 5 | 6 | 7 | 8 | 9           | 10 | 11 | 12 | 1                                | 2 | 3 | 4 | 1                     | 2 | 3 | 4 |
| Diploma/Degree                                                                                 |                   |   |   |   |   |             |    |    |    |                                  |   |   |   |                       |   |   |   |
| Describe Course of Study                                                                       |                   |   |   |   |   |             |    |    |    |                                  |   |   |   |                       |   |   |   |
| Describe any specialized training, apprenticeship, skills and extra-curricular activities      |                   |   |   |   |   |             |    |    |    |                                  |   |   |   |                       |   |   |   |
| Describe any honors you have received                                                          |                   |   |   |   |   |             |    |    |    |                                  |   |   |   |                       |   |   |   |
| State any additional information you feel may be helpful to us in considering your application |                   |   |   |   |   |             |    |    |    |                                  |   |   |   |                       |   |   |   |

| Indicate any foreign languages you can speak, read and / or write |        |      |      |
|-------------------------------------------------------------------|--------|------|------|
|                                                                   | FLUENT | GOOD | FAIR |
| SPEAK                                                             |        |      |      |
| READ                                                              |        |      |      |
| WRITE                                                             |        |      |      |

List professional, trade, business or civic activities and offices held.  
*You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status:*

### References

Give name, address and telephone number of three references (not related to you), whom you have known for at least one year, and are not previous Employers.

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

(Optional) Describe any military or other training received relevant to the position for which you are applying.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you physically or otherwise unable to perform the duties of the job for which you are applying?  Yes  No

### 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, handicap or other protected status.

| 1 | Employer            | Dates Employed |    | Work Performed |            |
|---|---------------------|----------------|----|----------------|------------|
|   |                     | From           | To |                |            |
|   | Address             |                |    |                |            |
|   | Telephone Number(s) |                |    |                |            |
|   | Job Title           |                |    |                | Supervisor |
|   | Reason for Leaving  |                |    |                |            |

|                    |                     |                |    |                |
|--------------------|---------------------|----------------|----|----------------|
| 2                  | Employer            | Dates Employed |    | Work Performed |
|                    |                     | From           | To |                |
|                    | Address             |                |    |                |
|                    | Telephone Number(s) |                |    |                |
|                    | Job Title           | Supervisor     |    |                |
| Reason for Leaving |                     |                |    |                |
| 3                  | Employer            | Dates Employed |    | Work Performed |
|                    |                     | From           | To |                |
|                    | Address             |                |    |                |
|                    | Telephone Number(s) |                |    |                |
|                    | Job Title           | Supervisor     |    |                |
| Reason for Leaving |                     |                |    |                |
| 4                  | Employer            | Dates Employed |    | Work Performed |
|                    |                     | From           | To |                |
|                    | Address             |                |    |                |
|                    | Telephone Number(s) |                |    |                |
|                    | Job Title           | Supervisor     |    |                |
| Reason for Leaving |                     |                |    |                |
| 5                  | Employer            | Dates Employed |    | Work Performed |
|                    |                     | From           | To |                |
|                    | Address             |                |    |                |
|                    | Telephone Number(s) |                |    |                |
|                    | Job Title           | Supervisor     |    |                |
| Reason for Leaving |                     |                |    |                |

If you need additional space, please continue on a separate sheet of paper.

**Special Skills and Qualifications**

Summarize special job-related skills and qualifications acquired from employment or other experience.

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# Applicant's Statement

A. I certify that the information contained in this application is true and correct. I understand that any false or misleading statements or omissions regarding this application, whenever discovered, are grounds for disqualification from further consideration or for dismissal from employment.

B. If employed, I agree to conform to the guidelines and policies of the Company. I understand that MY EMPLOYMENT IS AT-WILL AND CAN BE TERMINATED AT ANY TIME AND FOR ANY REASON WITH OR WITHOUT ADVANCE NOTICE.

C. I understand and agree that only the President of the Company has any authority to enter into any agreement to employ me for any specified period of time or to modify terms and conditions of my employment. I agree that such an agreement must be in writing and signed by the President, and I will not rely upon anything else.

D. I understand and agree that the Company may make a full and complete investigation of my personal or employment history, and authorize any former employer, person, firm, corporation, school, government agency, or other entity to provide the Company with any information (including fact or opinion) they may have regarding me. In consideration of the Company's review of this application, I release the Company and all providers of information from any liability arising from a violation of the Fair Credit Reporting Act ("FCRA"). I understand and agree that if offered employment by the Company to provide truthful information (including fact or opinion) regarding my enrollment to any potential or future employer and release and waive any claims against the Company for truthfully communicating any such information to a potential or future employer.

E. I understand and agree that I may be required to submit to drug testing and a complete post-offer medical examination as part of my application for employment. I also understand and agree that I may be required to submit to a complete medical examination during my employment with the Company, provided that such examination is job-related and consistent with business necessity. The cost of such examination will be paid by the Company. I authorize the physician conducting the examination and any laboratory testing any specimen obtained by the physician or collection site to disclose the results of the examination and the laboratory test to the Company in accordance with state and/or federal laws. The Company will keep such results confidential and disclose the results only to persons who need to know or where required by law. Also, I agree to fully cooperate and provide the Company with any additional consent(s) and/or release(s) as required by the Company to investigate my employment application.

F. The Company may inquire into and consider any criminal conviction record they you may have after it makes a conditional offer of employment to you. The Company may withdraw a conditional employment offer if you have a criminal conviction record which bears a rational relationship to the duties and responsibilities of the position for which you are applying. Any criminal conviction record that is more than 10 years old or that involves certain Family Court matters will not be considered.

G. I understand and agree that if offered employment by the Company, I may be required to disclose military service information in accordance with the law, and that any such employment offer shall be dependent upon the receipt of a satisfactory military record as determined by the Company.

H. I understand and agree that all of the foregoing terms and conditions will become part of my employment relationship with the Company if I am employed by the Company.

Authorization/Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_