

Application for Employment



PLEASE PRINT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify the Company.

Position(s) applied for _____ Date of application _____ / _____ / _____

Referral Source ☐ Advertisement ☐ Employee ☐ Relative ☐ Government Employment Agency
☐ Walk-in ☐ Private Employment Agency ☐ Other

Name of source (if applicable). _____

Name _____
LAST FIRST MIDDLE

Address _____
STREET CITY STATE ZIP CODE

Telephone # () _____ Mobile/Other Phone # () _____ Social Security # _____

If you are under 18, can you furnish a work permit if required? ☐ Yes ☐ No

If no, please explain _____

Have you ever applied for work with this company before ☐ Yes ☐ No If yes, when/where _____

Have you ever worked for this company before ☐ Yes ☐ No If yes, when/where _____

Reason for leaving _____ Name of last supervisor _____

Are you legally eligible for employment in this country? ☐ Yes ☐ No

If hired, when can you begin working? _____

Type of employment desired ☐ Full-Time ☐ Part-Time ☐ Temporary

Can you relocate if the job requires you to do so? ☐ Yes ☐ No

Can you travel if the job requires you to do so? ☐ Yes ☐ No

Can you meet the attendance requirements of the position? ☐ Yes ☐ No

Can you work overtime if the job requires you to do so? ☐ Yes ☐ No

Have you been convicted of a felony in the last seven (7) years? ☐ Yes ☐ No

If yes, please explain _____

CONVICTION MAY NOT NECESSARILY DISQUALIFY YOU FROM OBTAINING EMPLOYMENT. EACH CASE WILL BE CONSIDERED IN RELATION TO THE POSITION FOR WHICH YOU ARE APPLYING.

Driver's license number if driving is an essential job function _____ State _____

Do you have a CDL? ☐ Yes ☐ No If so, what endorsement? _____



Employment History

Provide the following information for your last three employers beginning with the most recent. Explain any gaps in employment in the comments section below.

| | | | | |
|--------------------------------|-----------|--------------------|-----|--|
| EMPLOYER | TELEPHONE | DATES EMPLOYED | | SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES |
| | | FROM | TO | |
| ADDRESS | | | | |
| JOB TITLE | | HOURLY RATE/SALARY | | |
| | | STARTING | | |
| IMMEDIATE SUPERVISOR | | \$ | PER | |
| | | | | |
| REASON FOR LEAVING | | HOURLY RATE/SALARY | | |
| | | FINAL | | |
| CAN WE CONTACT FOR A REFERENCE | | \$ | PER | |
| | | | | |

| | | | | |
|--------------------------------|-----------|--------------------|-----|--|
| EMPLOYER | TELEPHONE | DATES EMPLOYED | | SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES |
| | | FROM | TO | |
| ADDRESS | | | | |
| JOB TITLE | | HOURLY RATE/SALARY | | |
| | | STARTING | | |
| IMMEDIATE SUPERVISOR | | \$ | PER | |
| | | | | |
| REASON FOR LEAVING | | HOURLY RATE/SALARY | | |
| | | FINAL | | |
| CAN WE CONTACT FOR A REFERENCE | | \$ | PER | |
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| | | | | |
|--------------------------------|-----------|--------------------|-----|--|
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| REASON FOR LEAVING | | HOURLY RATE/SALARY | | |
| | | FINAL | | |
| CAN WE CONTACT FOR A REFERENCE | | \$ | PER | |
| | | | | |



Employment History

| SCHOOL | YEARS COMPLETED | DEGREE/DIPLOMA | GPA/CLASS RANK | MAJOR | MINOR |
|--------|-----------------|----------------|----------------|-------|-------|
| | | | | | |
| | | | | | |
| | | | | | |

References

List below three business/work references (no related to you) whom you have known at least one year.

| NAME | TELEPHONE | YEARS KNOWN |
|------|-----------|-------------|
| | | |
| | | |
| | | |

Additional Information

List below professional, trade, business or other associations of which you are a member and any offices you hold.

EXCLUDE MEMBERSHIPS WHICH COULD REVEAL YOUR SEX, RACE, RELIGION, NATIONAL ORIGIN, COLOR, DISABILITY OR ANY OTHER PROTECTED STATUS.

| ORGANIZATION | OFFICE HELD |
|--------------|-------------|
| | |
| | |
| | |

List special accomplishments, publications, awards, etc.

EXCLUDE MEMBERSHIPS WHICH COULD REVEAL YOUR SEX, RACE, RELIGION, NATIONAL ORIGIN, COLOR, DISABILITY OR ANY OTHER PROTECTED STATUS.

List any special training, skills, licenses and/or certifications that may qualify you as being able to perform the function of the position for which you are applying.

List additional information that you feel we should consider.



I understand that if I am employed, any misrepresentation or material omission made by me on this application will be cause for cancellation of this application or immediate termination from the employer's service.

I give the employer the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information I have provided on this application. I hereby release from liability the employer and its representatives for seeking, obtaining and using such information. I also release from liability any persons, corporations or organizations for releasing such information.

The employer does not unlawfully discriminate in employment, and no question on this application is used or the purpose of limiting or excusing any application from consideration for employment on a basis prohibited by local, state or federal law.

If I am hired, I understand that I am free to resign at any time, with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application is not an agreement or contract for employment.

I understand it is the company's policy not to refuse employment opportunities to qualified individuals with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

By signing this application I agree that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant _____ Date _____ / _____ / _____
