



We are an equal opportunity employer and comply with all federal, state and local laws prohibiting discrimination in employment practices based on race, color, religion, sex, national origin, age, disability, status as a Vietnam-era or special disabled veteran, marital status, or sexual orientation.

Application for Employment

PERSONAL DATA (PLEASE PRINT):

LAST NAME	FIRST NAME	MIDDLE INITIAL	DATE
STREET		CITY	STATE ZIP
()		TELEPHONE	EMAIL ADDRESS

Were you previously employed by this company? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, when:	Position Applied For:
How were you referred to the Company?	Please indicate the department(s) in which you have relatives working, if any: Department: Relationship:
Are you legally authorized to work in U.S.? (If hired, you will be required to provide proof of work authorization.) <input type="checkbox"/> YES <input type="checkbox"/> NO	Are you at least 18 years old? <input type="checkbox"/> YES <input type="checkbox"/> NO If not, your employment will be subject to verification that you meet state/federal minimum age requirements for the type of work you are applying for and have obtained a valid work permit.

EDUCATION:

HIGH SCHOOL (NAME AND ADDRESS): _____ COMPLETED: YES NO

NAME AND ADDRESS OF COLLEGE(S) OR TRADE SCHOOL(S): _____ YEARS COMPLETED: _____ DEGREE RECEIVED: _____ MAJOR: _____ MINOR: _____

AVAILABILITY:

INDICATE WITH AN 'X', THE TIMES YOU ARE AVAILABLE

	MON	TUES	WED	THUR	FRI	SAT	SUN
A.M.							
P.M.							



U.S. MILITARY SERVICE:

BRANCH OF SERVICE

SPECIAL/TECHNICAL TRAINING (IF APPLICABLE)

OCCUPATION SPECIALIZATION

JOB-RELATED AVOCATIONAL INTERESTS AND/OR ACTIVITIES (schools, campus, professional and/or community): You may omit those which indicate race, color, religion, sex, national origin, age, disability, status as a Vietnam-era or special disabled veteran, marital status or sexual orientation.

EMPLOYMENT HISTORY:

Please list your work experience, beginning with your most recent position, for the past ten years, including U.S. military service, schools, part-time employment while in school, self-employment, and periods of unemployment. Please do not indicate "see resume."

Employer:	Telephone: ()
Street: City: State:	From:
Name and Title of Supervisor:	Month _____ Yr _____
Position Title:	To:
Job Duties:	Month _____ Yr _____
	Salary:
	Start \$ _____ Per _____
	End \$ _____ Per _____
	Reason for Leaving:

Employer:	Telephone: ()
Street: City: State:	From:
Name and Title of Supervisor:	Month _____ Yr _____
Position Title:	To:
Job Duties:	Month _____ Yr _____
	Salary:
	Start \$ _____ Per _____
	End \$ _____ Per _____
	Reason for Leaving:

Please list three professional/personal references:

Name:	Email:	Phone Number:	Relationship:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



APPLICANT AGREES TO THE FOLLOWING CONDITIONS OF EMPLOYMENT:

Please Read Carefully Before Signing This Form

1. All information contained in this application is true and correct to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am hired, regardless of when such information is discovered.
2. I authorize the company to investigate my responses on this application and contact any or all of my former employers or any individuals familiar with me or my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information, whether favorable or unfavorable, about me or my employment. I voluntarily and knowingly fully release and hold harmless any persons or organizations providing information pertaining to me or my employment.
3. I understand that upon receiving a job offer, a physical examination and drug screening may be required. (Note: If this is a job requirement, you will be notified.)
4. I understand that prior to my employment I may be asked to sign a background check consent form or other documentation in order to facilitate my hiring. I agree to sign these forms.
5. I understand that this application remains current for only 90 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.
6. This Company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state or local law. The Company likewise does not tolerate harassment based on sex, race, color, religion, national origin, citizenship, age, disability or any other protected status. Examples of prohibited harassment include, but are not limited to, unwelcome physical contact, offensive gestures, unwelcome comments, jokes, epithets, threats, insults, name-calling, negative stereotyping, possession or display of derogatory pictures or other graphic materials, and any other words or conduct that demean, stigmatize, intimidate, or single out a person because of his/her membership in a protected category. Harassment of our employees is strictly prohibited, whether it is committed by a manager, coworker, subordinate or non-employee (such as a vendor or customer). The Company takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.
7. Regardless of whether or not I become employed by the company, I recognize that this application is not and should not be considered a contract of employment. I understand that employment at the company is on an at-will basis and that my employment may be terminated with or without cause, and without notice, at any time, at my option or the company's, unless specifically provided otherwise in a written employment contract. I further understand that no company employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than an officer or official of the company, and then only by means of a signed, written document.

Signature of Applicant _____ Date _____

Thank you for your interest in our company.