



## APPLICATION FOR EMPLOYMENT

### An Equal Opportunity Employer

**We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions are based on job-related factors.**

Position Sought: \_\_\_\_\_ Today's Date \_\_\_\_\_

How did you learn about the position? \_\_\_\_\_

What type of employment are you seeking? Full Time ☐ Part Time ☐ Temporary ☐

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Office Phone \_\_\_\_\_ Other Phone \_\_\_\_\_

Email Address: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

On what date would you be available for work? \_\_\_\_\_ Desired Wage/Salary \$ \_\_\_\_\_

If hired, can you furnish proof you are eligible to work in the U.S.? ☐ Yes ☐ No

Have you ever applied here before? ☐ Yes ☐ No If yes, when? \_\_\_\_\_

Were you ever employed here? ☐ Yes ☐ No If yes, when? \_\_\_\_\_

If employed, do you expect to be engaged in any additional business or employment outside of our job?

☐ Yes ☐ No If yes, give details \_\_\_\_\_

EDUCATION				
School Name	Location	Years Attended	Degree Received	Major

Other training, certifications, or licenses held: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What machines or equipment can you operate that are related to the job for which you are applying? \_\_\_\_\_

\_\_\_\_\_

For Driving Jobs **Only**: Do you have a valid driver's license? ☐ Yes ☐ No

Driver's License Number \_\_\_\_\_ Class of License \_\_\_\_\_ State Issued: \_\_\_\_\_

Have you had your driver's license suspended or revoked in the last 3 years? ☐ Yes ☐ No

If yes, give details: \_\_\_\_\_



## EMPLOYMENT

(Most Recent First.)

1. Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Dates Employed \_\_\_\_\_ Prior Position Held within Company (if any): \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
Duties Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

2. Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Dates Employed \_\_\_\_\_ Prior Position Held within Company (if any): \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
Duties Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

3. Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Dates Employed \_\_\_\_\_ Prior Position Held within Company (if any): \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
Duties Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

4. Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Dates Employed \_\_\_\_\_ Prior Position Held within Company (if any): \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
Duties Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

## REFERENCES

Have you worked or attended school under any other name? ☐ Yes ☐ No

If yes, give names: \_\_\_\_\_

Are you presently employed? ☐ Yes ☐ No

If yes, whom do you suggest we contact? \_\_\_\_\_

Have you ever been fired from a job or asked to resign? ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_

Give three references, not relatives.

Name	Address	Phone



## ACKNOWLEDGMENT AND AUTHORIZATION

I certify that the answers given herein are true and complete to the best of my knowledge.

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 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 document 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(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date