

APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, creed, color, age, sex, religion or national origin.

(PLEASE PRINT)

Position(s) Applied For _____ Date of Application _____

Last Name _____ First Name _____ Middle Name _____
Address _____ Number _____ Street _____ City _____ State _____ Zip Code _____
Telephone Number _____ Cell # _____ Social Security Number _____

Date of Birth _____ Drivers License Number _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Do any of your friends, relatives work here? Yes No

If Yes, state name _____

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.

Date available for work _____ / _____ / _____ What is your desired salary? _____

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

Can you travel if a job requires it? Yes No

EDUCATION

School	Name & Address	Years Completed	Diploma/Degree
High School			
Undergraduate College			
Graduate/Professional			
Other/Specify			

WORK 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, disabilities or other protected status.

Employer	Dates Employed From / To	Work Performed
Address	Hourly Rate/Salary Starting / Final	
Present Job Title	Supervisor	
Reason for Leaving	May We Contact?	
	Yes or No	

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COMMENTS: Include explanation of any gaps in employment.

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

List Specialized Skills (skills, equipment operated)

PC/MAC _____	Spreadsheet _____	Production/Mobile	Other (list)
Typewriter _____	Word Processing _____	Machinery (list)	
WPM _____			

State any additional information you feel may be helpful to us in considering your application.

Additional Information

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

PERSONAL/PROFESSIONAL REFERENCES

Do not include family members.

Name	Phone Number	Occupation

Physical Record: Do you have any physical condition which may limit your ability to perform the job applied for?

In Case of an Emergency Notify (Include Name, Address, and Phone Number)

APPLICANT'S STATEMENT

I certify that the answers I've given are all true and complete.

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice. I also understand that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date