

Employment Application

		Applicant	Informa	ation				
Full Name:	lame:			Date:				
_	Last	First			М.І.			
Address:	Street Address					Apartment/Unit #		
	 City				State	ZIP Code		
Phone:		Er	mail					
Date Availat	ble:Social Security No.:			Desired Salary: <u>\$</u>				
Position App	blied for:							
Are you a cit	tizen of the United States?	YES NO	lf no, a	re you	authorized to work	YES NO in the U.S.?		
Have you ev	ver worked for this company	YES NO ?	lf yes, v	when?_				
		Educ	cation					
High School	:							
-	To:		YES	NO				
College:		Address:						
	To:		YES	NO				
Other:		Address:						
From:	To:	Did you graduate?	YES	NO □	Degree:			
		Refer	rences					
Please list t	hree professional referenc	es (non-family).						
Full Name	»:		F	Relatior	nship:			
Company			F	hone:				
Address:								

Full Name:	Relationship:							
Company:	Phone:							
Address:								
Full Name:	me: Relationship:							
Company:	: Phone:							
Address:								
	Previous Em	nployme	nt					
Company:	Phone:							
	Supervisor:							
Job Title:	Starting Salary		Ending Salary: <u>\$</u>					
Responsibilities:								
From:To:		Reason fo	r Leaving:					
May we contact your previous supervisor f		YES	NO □					
Company:		Phone	9:					
Address:	Supervisor:							
Job Title:	Starting Salary: <u>\$</u>							
Responsibilities:								
May we contact your previous supervisor f	or a reference?	YES						
Company:								
Address:	Supervisor:							
Job Title:	Starting Salary	Ending Salary: <u>\$</u>						
Responsibilities:								
From:To:	I	Reason for Leaving:						
May we contact your previous supervisor f	or a reference?	YES	NO □					

Please explain any gaps in your employment history:

	Yes	No
Have you ever been discharged or forced to resign?		
If yes, explain:		
	Yes	No
Have you ever been convicted of a felony?		
If yes, explain:		
Have you ever been arrested or charged with any misd free on your own recognizance pending disposition or t		or felony not disclosed for which you are out on bail or Yes No
consider whether the circumstances of the arrest subst	es" to this ancially ro dvised that	question is not an automatic bar to employment. We will
Driv	ving Re	cord
Answer only if driving is a requirement of the job for whi	ch you are	
Do you have a valid driver's license? YES		
Have you had any tickets? YES NO		
If yes, please explain:		
	tary Ser	rvice
Branch:		
Rank at Discharge:		ype of Discharge:
If other than honorable, explain:		

Disclaimer and Signature

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

I understand that any misrepresentation, falsification or omission of this application shall be sufficient reason for refusal to hire or, if discovered after employment has begun, dismissal of my employment. I hereby authorize investigation of all matters contained in this application and agree that if results of such investigation are not satisfactory, any offer of employment may be withdrawn, or, if applicable, my employment may be terminated immediately. I agree to conform to and adhere to the rules and regulations governing my employment. Further, I understand and agree that this application and any other materials I may receive are not intended to be, nor shall be construed to be a contract of employment, and that my employment and compensation may terminate, with or without notice, at any time, at the option of either myself or my employer.

Federal Law prohibits the company from hiring any person unless he/she presents documents which establish identity and eligibility to work in the United States. Therefore, the company will require that each new hire present such documents as a condition of employment.

The company does not discriminate in hiring or employment in accordance with requirements of all applicable local, state, and federal laws, on the basis of race, color, creed, sex, national origin, age, veteran status or physical or mental disability unrelated to job requirement.

You are neither asked nor required to disclose information about physical or mental disabilities. However, if you wish the company to consider arranging a reasonable accommodation due to a physical or mental disability, you may suggest the kind of accommodation you believe would be appropriate for consideration.

The use, possession, sale or being under the influence of illegal drugs or alcohol while on company time is prohibited.

Signature:

Date

