

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer - All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.

PERSONAL INFORMATION

Incomplete information could disqualify you from further consideration. Please complete all fields.

Name _____ Date _____

Address _____

E-mail Address _____

Home Phone # _____ Cell Phone # _____

Are you eligible to work in the U.S? ___Yes ___No

If you are under 18, can you furnish a work permit? ___Yes ___No

Can you work any shift, including weekends? ___Yes ___No

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? ___Yes ___No (This question is not designed to elicit information about an applicant's disability. Please do not supply information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent allowed by law.)

EMPLOYMENT DESIRED: Date you can start _____ Desired rate of pay _____

Position desired _____

Are you currently employed? ___ If so, may we inquire of your present employer? _____

REFERRAL SOURCE: How did you hear about us? _____

Have you ever worked for this company? ___Yes ___No Explain _____

Do you know anyone who works for our company? ___Yes ___No If yes, who? _____

EDUCATION	Name and location of school	No. of yrs. Attended	Degree Received	Major
High School				
College or University				
Trade, Business or Correspondence School				

Summarize any special training, computer skills, licenses, certifications that may assist in the position applied for: _____

EMPLOYMENT HISTORY: Starting with the most recent employer, provide the following information

Employer	Telephone	Dates Employed	Wage Rate
Employer Address	Job Title	Supervisor	Work Responsibilities
Reason for leaving:			

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REFERENCES: Give the names of 3 persons not related to you, whom you have known at least 3 years.

Name	Telephone	Relationship	Years Acquainted

Please read carefully before signing

I understand that this employer does not unlawfully discriminate in employment and no question is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state, or federal law.

I certify that all information I have provided to apply for and secure work with this employer is true, complete, and correct.

I expressly authorize the employer, its representatives, employees or agents to contact and obtain information from all references, employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that any information provided by me that is found to be false, incomplete, or misrepresented in any respect, will be sufficient cause to eliminate me from further consideration for employment or may result in my immediate dismissal from the employer's service, whenever it is discovered.

Date _____ Signature _____