

Application For Employment

An Equal Opportunity Employer

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

PERSONAL

Date of application _____

Name _____

Phone _____

Present Address _____

Position Applied For _____ Rate of Pay Expected _____

Would you like to work Part-time _____ Full-time _____

If Part-time specify what days and hours available _____

Were you previously employed by the organization? ____ If yes, When? ____

List any friends or relatives working here, other than spouse _____

If your application is considered favorably, when could you start work? _____

Are there any other work experiences, skills, or qualifications that you feel would especially fit you for work here? Please add any additional comments.

If you are applying for a job with minimum age requirements, you may be required to submit proof of age. For jobs with minimum age requirements:

Date of Birth_____

Do you have a valid driver's license?_____

Have your license ever been revoked or suspended? _____

If hired, can you furnish proof of eligibility to work in the United States?_____

(This does not automatically disqualify you from employment since the offence, date, and position applied for will be considered.)

Have you ever been convicted of a felony?_____ **If so explain**

Have you previously applied here?_____ **If so when?** _____

REFERENCES

Please list at least three references that we may contact that are not related to you

	<u>NAME</u>	<u>ADDRESS</u>	<u>PHONE</u>
1.			
2.			
3.			
4.			

WORK HISTORY

Company Name:

Address:

Phone:

Job title:

Supervisor:

Rate of Pay:

Reasons for leaving:

Date employed:

Description of Duties:

Company Name:

Address:

Phone:

Job title:

Supervisor:

Rate of Pay:

Reasons for leaving:

Date employed:

Description of Duties:

Company Name:

Address:

Phone:

Job title:

Supervisor:

Rate of Pay:

Reasons for leaving:

Date employed:

Description of Duties:

I certify that the answers given by me to the foregoing questions are statements that are true and correct without consequential omissions of any kind whatsoever. I agree that the company will not be liable in any respect if my employment is terminated due to falsity of statements answers or omissions made by me in this questionnaire. I also authorize schools or persons names about to give any information regarding my employment, character, and qualifications. I hereby release the said companies, person's or schools from all liability for any damage for issuing this information. I understand that there is no implied contract of employment and that if employed. I have been hired at the will of the employer, and that my employment may be terminated at will, at any time. With or without cause the employers only obligation being to pay salary or wages due and owing at the time of termination. Finally, I understand that all company property must be returned and my indebtedness to the company must be paid before my termination. I authorize the company to deduct from the final paychecks all the monies due owing the company.

Signature_____ **Date**_____