

APPLICATION FOR EMPLOYMENT

PERSONAL

Date: _____

Last Name _____ First _____ Middle Initial _____

Street _____ City _____ State _____ Zip _____

Social Security Number _____ Phone Number _____

Are you 18 years of age or older? _____ Yes _____ No

If offered employment, will you be able to submit verification of your legal right to work in the U.S.?
_____ Yes _____ No

Have you been convicted of a felony? _____ Yes _____ No

EMPLOYMENT DESIRED

Position _____ Date you can start? _____ Salary Desired _____

Are you employed now? _ If so, may we inquire of your present employer? _____ Yes _____ No

Have you ever applied for employment with us? _____ If so, when? _____

State names of relatives working for us _____

EDUCATION

	Name of Location	Number of Years	Subjects of Studies
Elementary			
High School			
College			
Trade or Business School			

Prospective employees will receive consideration for employment without regard to race, sex, age, national origin, and non-job related disability or veteran status.

EMPLOYMENT (Attach additional sheets if necessary)

Company Name _____ Phone Number _____
Address _____ Employed (Month/ Year) _____
Name of Supervisor _____ From _____ To _____
Job Title _____ Salary _____
Reason for Leaving _____

Company Name _____ Phone Number _____
Address _____ Employed (Month/ Year) _____
Name of Supervisor _____ From _____ To _____
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Address _____ Employed (Month/ Year) _____
Name of Supervisor _____ From _____ To _____
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Reason for Leaving _____

Have you ever been bonded? _____ Yes _____ No

If yes, with what employers? _____

I hereby certify that all information included on this application is true and correct to the best of my knowledge and belief and do hereby authorize all investigations deemed necessary by the Company to verify the information contained herein and necessary qualifications for the job(s) for which I am applying. I hereby authorize the Company to obtain this information and release and hold harmless the Company, its officers and representatives, and any Company or person providing this information, from any liability or claims resulting from obtaining this information.

I understand and agree that if employed, the terms and condition of my employment, including duties, hours worked and days of work may be changed from time to time by the Company as it deems necessary, that I will conform to the rules and regulations of the Company and that employment with the Company is at the mutual consent of the employee and the Company. Accordingly, either the employee or the Company may terminate the employment relationship at will for any or no reason at any time. I understand that no supervisor, official or representative of the Company has the authority to enter into any contract of employment for any specific period of time or to make any agreement, orally or in writing, contrary to the terms of this paragraph. I further understand and agree that any false statements or material omissions on this application may result in the immediate dismissal from employment, or discontinuation of further consideration of my application.

Date

Signature