# **Application For Employment**

Please Read Before Filling Out This Application

This Company does not discriminate in hiring or employment on the basis of race, color, sex, religion, disability, national origin, citizenship, or on the basis of age with respect to persons 18 years or older. No question on this application is intended to secure information to be used for such discrimination. Proof of identity and work authorization will be required upon employment in accordance with federal regulations. **This Company intends to check and hold you responsible for the accuracy of the statements you make on this application.** This application will receive consideration for **thirty (30) days.** If you have not heard from the Company within thirty days and wish to receive further consideration for employment, it will be necessary to complete another application form.

## **Personal Data**

lame(Last)			
(Last)	(First)	(Middle)	
re you 18 years or older? Yes	No		
ddress			
(Street)	(City)	(State) (A	Zip)
elephone Number			
lave you ever been convicted	f a crime other than a minor traffic violati	on? Yes No	

# **Educational Data**

Circle Highest Grade Completed:						
1 2 3 4 5 6 7 8 9 10 11 12 1 2 3 4 5 1 2 3 4 Grade, Junior High or High School College or University Graduate School						
Type of School	Name of School	Location		Major Subject or Course of Study	Did You Graduate?	
Junior High School				///////////////////////////////////////	/	
High School						
College						
Business or Trade School						
Correspondence School						
Other (Specify)						
Graduate School						
List Degree(s) Obtained						

# Employment

Job applied for	Salary desired
Have you ever applied here before?	_ When?
Have you ever worked for this Company before?	When?
If yes, give the name(s) if different from the one	e given on this application
Are you available to work any shift?	Any day of the week?
If not, for what shifts and days are you available?	
When could you report for work?	

# Work History

From (mo./yr.)	Company	۲ (	Telephone AREA ( )		Starting Salary \$ per
To (mo./yr.)	Address	City	State	Zip	Final Salary \$ per
Supervisor's Name	ə/Title	Type of Business			If this is your current  yes employer, may we contact  no
Your Position/Title		Responsibilities/Duties	S		
Specific Reason fo	r Leaving				

From (mo./yr.)	Company		Telephone			Starting Sala	ary
			( )			\$	per
To (mo./yr.)	Address	City		State	Zip	Final Salary	
						\$	per
Supervisor's Name/T	ītle	Type of Business					
Your Position/Title		Responsibilities/Dut	ies				
Specific Reason for I	_eaving						

From (mo./yr.)	Company		Telephone		Starting Sa	lary
			( )		\$	per
To (mo./yr.)	Address	City	State	Zip	Final Salary	/
					\$	per
Supervisor's Name/	Title	Type of Business				
Your Position/Title		Responsibilities/Du	ties			
Specific Reason for	Leaving					

## **Relatives In Our Employment**

Name	Relationship	Name	Relationship

#### **Military**

Branch of Service: \_

Duties in the service, including schools and training:

### **Special Skills**

What knowledge, special technical or computer skills, and/or other qualifications have you acquired from employment or other experience? Include any specific equipment that you can proficiently operate.

List any first aid or emergency response training for which you are currently certified (give date of certification).

#### References

Give three references who are not family or friends.							
Name	Occupation/Company	Years Known	Phone	Address			

#### **Affidavit**

I certify that all information given on this application and any accompanying documents is true and correct. I authorize, without liability, investigation of all statements in this application and accompanying documents.

I authorize all schools which I attended and all previous employers to furnish to the Company my record, reason for leaving and all information they may have concerning me, and hereby release them and the Company from all liability for any damage whatsoever arising therefrom.

I authorize my neighbors, friends or others with whom I am acquainted or who are acquainted with me to furnish the Company with information used in connection with the evaluation of my qualifications as a prospective employee. I release such persons and organizations from any legal liability in making such statements.

By signing this application, I authorize the Company to make investigations and I indicate my awareness that false statements or failures to disclose certain information may be sufficient to disqualify me for employment, or if employed, may result in my dismissal.

I understand that proof of identity and work authorization will be required upon employment in accordance with federal regulations. In the event of my employment by the Company, I agree to abide by all present and subsequently issued rules of the Company.

Name

(Please print)

Date\_