


Employment Application Form

PLEASE PRINT ALL INFORMATION REQUESTED		APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS		
PLEASE COMPLETE ALL PAGES.				
Name _____				
Present address _____				
How long at this address _____	Social Security No. _____			
Telephone _____				
If under 18, please list age _____				
Position applied for and salary desired (Be specific)	Days/hours available to work: No Pref Thur Mon Fri Tue Sat Wed Sun			
How many hours can you work weekly? _____ Can you work nights? _____				
Employment desired <input type="checkbox"/> FULL-TIME ONLY <input type="checkbox"/> PART-TIME ONLY <input type="checkbox"/> FULL- OR PART-TIME				
When can you start work? _____				
TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (City, State)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				
HAVE YOU EVER BEEN CONVICTED OF A CRIME? <input type="checkbox"/> No <input type="checkbox"/> Yes				
If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.				

APPLICATION FOR EMPLOYMENT	
Do you have a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No What is your means of transportation to work?	
Driver's license number	State of issue _____ <input type="checkbox"/> Operator <input type="checkbox"/> Commercial (CDL)
Expiration date	
Have you had any accidents during the past three years?	How many?
Have you had any moving violations during the past three years?	How Many?
Please list two references other than relatives or previous employers.	
Name	Name
Position	Position
Company	Company
Address	Address
Telephone _____	Telephone (____) _____
An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.	

MILITARY		
HAVE YOU EVER BEEN IN THE ARMED FORCES? <input type="checkbox"/> Yes <input type="checkbox"/> No		
ARE YOU NOW A MEMBER OF THE NATIONAL GUARD? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Specialty	Date Entered	Discharge Date

APPLICATION FOR EMPLOYMENT

Work Experience

Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer

Name of last supervisor

Employment dates

Pay or salary

Address

City, State, Zip Code

Phone number

From

Start

To

Final

Your last job title:

Reason for leaving (be specific)

List skills used or learned, advancements or promotions while you worked at this company.

Name of employer

Name of last supervisor

Employment dates

Pay or salary

Address

City, State, Zip Code

Phone number

From

Start

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Your Last Job Title:

Reason for leaving (be specific)

List skills used or learned, advancements or promotions while you worked at this company.

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From

Start

To

Final

Your last job title:

Reason for leaving (be specific)

List skills used or learned, advancements or promotions while you worked at this company.

APPLICATION FOR EMPLOYMENT	
May we contact your present employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
May we contact your past employers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Did you complete this application yourself	<input type="checkbox"/> Yes <input type="checkbox"/> No
If not, who did?	

Please answer the following questions to best of your ability:

Why are you interested in this position with us? What makes this position or company a place you want to be?

Describe why you believe you are the right person for the job.

Are there areas in your professional (work) life that you are looking to improve? If so, what?

What skills or areas do you excel in and / or enjoy doing?

Describe traits that make it easy for those who are your superior to work with you.

Do you perform well under pressure, and if so, how do you handle it?

PLEASE READ CAREFULLY

APPLICATION FORM WAIVER

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I also understand that (1) the Company has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of applicant _____ **Date:** _____

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.