

Name & Relationship

Application For Employment

We Are An Equal Opportunity Employer

Please Answer All Questions

NOTICE: Applicant should read the following information carefully before filling out any of the questions on this form.

We are an equal opportunity employer and fully subscribe to the principles of equal opportunity. It is our policy to seek the best qualified personnel in all positions without regard to race, color, religion, age, sex, disability, national origin or any other basis made unlawful by either state or federal law. It is our policy to comply with all federal and state employment statutes. Information requested on this application will not be used for any purpose prohibited by law.

LAST **FIRST** MIDDLE Social Security Number Name: State Zip Code How long have you lived at this address? ☐ Yes ☐ No Are you 18 years old or older? If not, state date of birth: ☐ Yes ☐ No If yes, when? Have you ever applied here before? ☐ Yes ☐ No If yes, when? Previously employed here? ☐ Yes □ No May we contact them? Present employer: Are you prevented from lawfully becoming employed in this country because of Visa or ☐ Yes □ No Immigration Status? Proof of citizenship or immigration status is required upon hire. On what date would you be available for work? Position applied for: ☐Full Time ☐Part Time ☐Shift Work □Temporary Position Availability: ☐ Yes □ No Are you currently on "lay-off" status and subject to work recall? ☐ Yes □ No Have you ever been convicted of a felony within the last 7 years? If yes, please explain: (Conviction will not necessarily disqualify an applicant from employment.) List any job duties you would be unable to perform: In case of emergency notify:

(Area Code) Phone Number

Employment Experience

Employer:	, gender, national origin, disabilities or other pro Employed	Duties Duties
Employer.		Performed
Address:	From To	Perioritied
Phone Number:	Hour Rate/Salary	
lob Title:	Starting Final	
ob Title.	Starting 1 mar	
Reason for Leaving:		
Employer:	Employed	Duties
	From To	Performed
Address:		
Phone Number:		
	Hour Rate/Salary	
Job Title:	Starting Final	
Reason for Leaving:		
Employer:	Employed	Duties
	From To	Performed
Address:		
Phone Number:		
	Hour Rate/Salary	
Job Title:	Starting Final	
Reason for Leaving:		
Employer:	Employed	Duties
	From To	Performed
Address:		
Phone Number:		
1.1.70	Hour Rate/Salary	
Job Title:	Starting Final	
Reason for Leaving:		
ofessional, trade, business or civ	ric activities and offices held:	
	der, race, religion, national origin, age, ancestry, disability or ot	her protected status:

Education

		Name & Address Of School	Course of Study	Years Completed	Diploma Degree
	ementary School				
	High School				
	ergraduate College				
	raduate fessional				
Othe	er (Specify)				
Other Q	nformatior ualifications e special job-rela	- ted skills and qualifications acquired from employment -	nt or other experience.		
Other Q	ualifications	_	nt or other experience.		
Other Q	ualifications e special job-rela	_	nt or other experience.		
Other Q Summarize	ualifications e special job-rela	_	()) Phone Number	
Other Q Summarize	ualifications e special job-rela	ted skills and qualifications acquired from employment	() (Area Code) Phone Number	
Other Q Summarize	valifications e special job-relate Name	Led skills and qualifications acquired from employment	() (Area Code () (Area Code		:

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer. I further understand that any offer of employment is conditional upon passing a pre-employment independently administered alcohol/drug screening

Signature of Applicant

Arrange Int	erview	☐ Yes	□ No		
Remarks					
Hired	☐ Yes	□ No	Date Hired		
Job Title				Salary/Wage	
Departmen	t				
	E	Ву			
		Name & Ti	tle	Date	