



EMPLOYMENT APPLICATION

We are an Equal Opportunity Employer. We comply with all applicable Federal, State, and local laws concerning discrimination in employment. No question in this application is intended to elicit information in violation of any such law nor will any information obtained in response to any question be used in violation of any such law.

POSITION(S) APPLIED FOR		DEPARTMENT/PROPERTY	APPLICATION DATE
LAST NAME		FIRST NAME	MIDDLE INITIAL
ADDRESS		CITY	STATE ZIP
TELEPHONE ()		SSN#	DRIVERS LICENSE NO.
DATE AVAILABLE FOR WORK		EMPLOYMENT TYPE <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Seasonal	PERSONAL E-MAIL ADDRESS
Where did you hear of this position: Newspaper <input type="checkbox"/> Company Website <input type="checkbox"/> Employee Referral _____ (give name) Facebook Twitter <input type="checkbox"/> Internet Advertising (Monster, Career Builder, etc.) <input type="checkbox"/> Other _____			
Were you previously employed by this organization? <input type="checkbox"/> No <input type="checkbox"/> Yes Date(s) _____ Position _____			
List any relatives or friends working for this organization: NAME _____ RELATIONSHIP _____ _____			
WORK EXPERIENCE – LIST PRESENT AND FORMER EMPLOYERS BEGINNING WITH MOST RECENT			
1. FROM TO		COMPANY NAME & ADDRESS	TELEPHONE ()
POSITION HELD		DESCRIBE YOUR WORK	
SUPERVISOR AND TITLE		LAST WAGES PER	REASON FOR LEAVING
2. FROM TO		COMPANY NAME & ADDRESS	TELEPHONE ()
POSITION HELD		DESCRIBE YOUR WORK	
SUPERVISOR AND TITLE		LAST WAGES PER	REASON FOR LEAVING
3. FROM TO		COMPANY NAME & ADDRESS	TELEPHONE ()
POSITION HELD		DESCRIBE YOUR WORK	
SUPERVISOR AND TITLE		LAST WAGES PER	REASON FOR LEAVING
4. FROM TO		COMPANY NAME & ADDRESS	TELEPHONE ()
POSITION HELD		DESCRIBE YOUR WORK	
SUPERVISOR AND TITLE		LAST WAGES PER	REASON FOR LEAVING
Have you ever been terminated from employment or asked to resign by an employer? If yes, please explain:			

SPECIAL SKILLS & QUALIFICATIONS, MECHANICAL AND/OR TECHNICAL EXPERIENCE AND ABILITIES RELEVANT TO THE POSITION FOR WHICH YOU HAVE APPLIED

EDUCATION

NAME	ADDRESS/CITY & STATE	YEARS COMPLETED	DID YOU GRADUATE	COURSE OF STUDY
HIGH SCHOOL				
COLLEGE				MAJOR /DEGREE
OTHER				

BUSINESS REFERENCES (Supervisors, Co-Workers, etc.)

SUPERVISOR NAME	TELEPHONE/EMAIL ADDRESS	BUSINESS RELATIONSHIP
1.		
2.		
3.		

MISCELLANEOUS INFORMATION

Have you ever been convicted of a felony? (A conviction record will not necessarily be a bar to employment.) Yes No

If "Yes", please explain in full detail: _____

Have you ever been arrested for or convicted of a crime that has not been expunged by a court? Have you ever been convicted of or plead guilty to a "sexually oriented offense" or been required to register with a designated law enforcement official or been determined to be a "sexual predator" or a "sexually-oriented offender"? *NOTE: Answering "Yes" to this question is not an automatic bar to employment. Factors such as how this conviction would relate to the position, age and time of occurrence, the seriousness and nature of the circumstances will be considered. *We are not seeking convictions that have been expunged by a court* Yes No

If "Yes", please explain in full detail: _____

Can you verify your legal rights to work in the U.S. by providing a birth certificate, proof of U.S. Citizenship, or by some other means? Yes No

If you are under the age of 18, are you able to furnish a work permit? Yes No

Are you able to perform the job(s) for which you are applying? Yes No

APPLICANT'S CERTIFICATION

Please read carefully before signing

By signing below, I certify that I have read, understand and agree to each of the following statements: All of the information I have supplied on this application is true, accurate and complete, to the best of my knowledge, and I have not knowingly withheld any information which, if known to the Company, would affect my application unfavorably. If I am hired by the Company and if the Company discovers at any time during my employment that any of the statements or answers on this application are false, misleading, or incomplete, I may be dismissed immediately from my job. I agree to submit to a medical examination which may include testing for drugs, alcohol or disease detection prior to beginning work with the Company, and I understand that if I am employed by the Company, I may be required and I agree, to undergo a medical examination, when job related and consistent with business necessity. I also agree to submit to a test for the detection of unlawful drug use if required. In consideration of my employment with the Company, I agreed to abide by all the Company's rules and regulations. I understand that nothing in this employment application creates a contract of employment between me and the Company. If I am hired by the Company, my employment and compensation are "at will," which means that my employment can be terminated, either by the Company or me, with or without cause, and with or without notice. I understand that no manager or supervisor has the authority to make any employment agreement with me, either orally or in writing, that is not an at-will agreement. Only the President of the Company has the authority to enter into an employment agreement for any specific period of time, with me.

I agree to release to the Company or its designated agents all medical information, including but not limited to, files, reports, x-rays, evaluations, and opinions held by medical personnel, to the extent such information is job related and consistent with business needs. I acknowledge that this is a general release and that if hired, it remains in effect for the duration of my employment.

I authorize the Company to conduct any investigation regarding the information contained in my employment application which the Company thinks is necessary to determine my qualifications for assuming a job with the Company. I give the Company or its designated representatives my permission to contact any former employer, school, college or university, utility company, credit or finance bureau or office, any personal or professional reference, or any other appropriate source or individual for the purpose of gathering any information, personal or otherwise, that such sources may have about my character, general reputation, health, credit, education, or employment record. I hereby give my consent to any such sources to release to the Company whatever information they have about me. I also unconditionally release all names and unnamed sources from any and all liability which might result from furnishing any information about me. Upon written request, additional information as to the nature and scope of any credit report, if one is made, will be provided.

In the event of my personal indebtedness to the Company, I authorize the Company to withhold from my wages such amounts as permitted by law to satisfy my obligation to the Company.

APPLICANT'S SIGNATURE

DATE