

- 1 - Application

Application are considered for all position without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of non-job-related medical condition or handicap.

(PLEASE PRINT)

Date of application _____

Position(s) Applied For: _____

Referral Source: Advertisement Friend Relative Walk-in Employment Agency
 Other _____

Name: _____
LAST FIRST MIDDLE

Address: _____
NUMBER STREET CITY STATE ZIP

Telephone: () _____ Social Security Number _____ - - _____

Age: _____ Birthday: _____

If employed and you are under 18, can you furnish a work permit? Yes No
 Have you filed an application here before? Yes No If yes, give date: _____
 Have you ever been employed here before? Yes No If yes, give date: _____
 Are you employed now? Yes No May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country,
 because of Visa or Immigration Status? Yes No (proof of citizenship or immigration
 Status may be required upon employment)

On what date would you be available for work? _____
 Are you available to work Full Time Part Time Shift Work Temporary

Are you on a lay-off subject to recall? Yes No

Can you travel if a job requires it? Yes No

Have you been convicted of a felony within the last 7 years? Yes No
 (Conviction will not necessarily disqualify applicant from employment)

If yes, please explain: _____

AN EQUAL OPPORTUNITY EMPLOYER M / F / V /

- 2 -Application

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Employment Experience

Start with your present or last job include military service assignments and volunteer activities. Exclude organization names which indicate race, color, religion, sex or national origin.

1. _____ () Employer Telephone	Dates Employed	
	From To	Work performed
Address	Hourly rate/ Salary	
Job Title	Starting / Final	
Supervisor		
Reason for Leaving		
2. _____ () Employer Telephone	Dates Employed	
	From To	Work performed
Address	Hourly rate/ Salary	
Job Title	Starting / Final	
Supervisor		
Reason for leaving		

3. _____ () Employer Telephone	Dates Employed	
	From To	Work performed
Address	Hourly rate/ Salary	
Job Title	Starting / Final	
Supervisor		
Reason for leaving		

If you need additional space, please continue on a separate sheet of paper

Give name, address and telephone number of three references who are not related to you and are not previous employers.

1. _____
2. _____
3. _____

- 3 -Application

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Education

	Elementary	High	College/University	Graduate/Professional
School				
Years Completed Diploma/Degree Describe Course Of Study	(Circle) 4 5 6 7 8	(Circle) 9 10 11 12	(Circle) 1 2 3 4	(Circle) 1 2 3 4
Describe Specialized Train- ing, Appentice- ship, Skill, and Extra-Curricular Activities				

Honors Received

State any additional information you feel may be helpful to us in considering your application.

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. I understand that this application is not and is not intended to be a contract of employment.

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 company.

Signature of Applicant

Date

ARRANGE INTERVIEW <input type="checkbox"/> YES <input type="checkbox"/> NO		For Personnel Department Use Only	
REMARKS _____		Interviewer Date _____	
EMPLOYED <input type="checkbox"/> YES <input type="checkbox"/> NO	DATE OF EMPLOYMENT _____		
JOD TITLE _____	HOURLY/RATE/SALARY _____	DEPARTMENT _____	
BY: _____	Name and Title _____		Date _____