



APPLICATION FOR EMPLOYMENT
(Equal Employment Opportunity Employer)

GENERAL

NAME _____

ADDRESS _____

TELEPHONE _____ SOCIAL SECURITY # _____

DATE AVAILABLE FOR EMPLOYMENT _____

If employed and under 18, can you furnish a work permit? YES NO

Have you ever been employed by this company? YES NO

Are you employed now? YES NO

May we contact your present employer? YES NO

If yes, give name: _____

Are you prevented from lawfully becoming employed in this country

Because, of visa or immigration status? YES NO

Type of work desired: _____

Do you have a valid driver's license in this state? YES NO

License #: _____

Can you perform the essential functions of the job(s) for which you are applying? YES NO

Are you available to work FULL-TIME PART-TIME OVER-TIME? YES NO

Have you ever been convicted of a felony? YES NO

(Please note that a "YES" answer will not bar you from consideration for employment.)

If YES, please explain: _____

This company is an equal employment opportunity employer. All applications will be considered without regard to age, color, national origin, religion, disability, sex, or other protected status in accordance with applicable federal and state equal employment opportunity laws. This company will strive to accommodate any physical or mental limitation of employees or applicant in order to accomplish the essential functions of a job.

EDUCATION

ELEMENTARY	HIGH SCHOOL	COLLEGE	GRADUATE
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SCHOOL _____

NAME _____

YEARS _____

COMPLETED **4 5 6 7 8** **9 10 11 12** **1 2 3 4** **1 2 3 4**

COURSE OF _____

STUDY _____

SPECIAL SKILLS, QUALIFICATIONS AND CONSIDERATIONS:

Summarize special skills and qualifications, volunteer activities, military experience, employment or other activities related to the job you are seeking:

REFERENCES:

List three (3) non-relatives who are familiar with your qualifications and actual work history and ability:

<u>Name</u>	<u>Occupation/Relationship</u>	<u>Years Known</u>	<u>Telephone</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

EMPLOYMENT EXPERIENCE:

Start with your present or last job. List your last four (4) jobs in order. Do not omit any jobs.

Employer _____ Supervisor's Name _____

Address _____ Your Job Position _____

Telephone Number _____ Employed from _____ (mo/yr) to _____ (mo/yr)

Your Salary: Starting & Ending _____

Duties _____

What did you like most about your job? _____

What did you like least about your job? _____

Reason for leaving _____

Employer _____ Supervisor's Name _____
Address _____ Your Job Position _____
Telephone Number _____ Employed from _____ (mo/yr) to _____ (mo/yr)
Your Salary: Starting & Ending _____
Duties _____
What did you like most about your job? _____
What did you like least about your job? _____
Reason for leaving _____

Employer _____ Supervisor's Name _____
Address _____ Your Job Position _____
Telephone Number _____ Employed from _____ (mo/yr) to _____ (mo/yr)
Your Salary: Starting & Ending _____
Duties _____
What did you like most about your job? _____
What did you like least about your job? _____
Reason for leaving _____

Employer _____ Supervisor's Name _____
Address _____ Your Job Position _____
Telephone Number _____ Employed from _____ (mo/yr) to _____ (mo/yr)
Your Salary: Starting & Ending _____
Duties _____
What did you like most about your job? _____
What did you like least about your job? _____
Reason for leaving _____

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID. IF YOU HAVE ANY QUESTIONS REGARDING THIS STATEMENT, PLEASE ASK THEM BEFORE SIGNING.

I certify that all answers and statements I have made on this application (and resume or other supplementary materials) are true and complete without omission. I understand that any false information will be grounds for refusal to hire or for immediate discharge if I am employed. I authorize any persons or organizations names in this application to give you complete information and records regarding my employment, education, character, and qualifications.

YES NO

If hired I will be responsible for familiarizing myself with all rules and regulations of the Company as they presently exist or are later modified. *If hired I recognize that my employment can be terminated at the discretion of the Company or at my option, without notice, at any time, except as specifically set forth in writing in a current individual employment agreement.*

YES NO

I also understand that no representative of the Company has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits, or terms and conditions of employment, except specifically stated in a current written agreement signed by the president.

YES NO

I understand this application is not an offer of employment and no promises or representations of employment have been made to me at this time.

YES NO

I HAVE READ, UNDERSTAND, AND AGREE WITH THE ABOVE.

SIGNATURE OF APPLICANT

DATE

This application is valid for only ninety (90) days form the date signed. If I want to be considered for job openings more then ninety (90) days from date signed, I will submit a new application.