

**EMPLOYMENT APPLICATION**

An Equal Opportunity Employer

NAME: \_\_\_\_\_  
(Last) (First) (Middle)

ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ SOC. SEC. # \_\_\_\_\_

Is your age under 18? \_\_\_\_\_ If Yes, do you have a work permit? \_\_\_\_\_

Do you have a legal right to work in the USA? \_\_\_\_\_

Do you have documentation for this? \_\_\_\_\_

**JOB INTEREST**

<b>POSITION DESIRED:</b>	
<b>Other positions for which you are qualified:</b>	

Part Time \_\_\_\_\_ Full Time \_\_\_\_\_ Temporary \_\_\_\_\_ Regular \_\_\_\_\_

Date Available: \_\_\_\_\_ Preferred Hours: \_\_\_\_\_

Have you worked for the Company before? \_\_\_\_\_ If Yes, FROM \_\_\_\_\_ TO: \_\_\_\_\_

Do you have relatives, or live with anyone, who works for the Company? \_\_\_\_\_ If so, who? \_\_\_\_\_

If employed in this position, would you be in a supervisory or subordinate role to a relative? \_\_\_\_\_

**EDUCATION AND TRAINING**

LIST ALL EDUCATION OR TRAINING WITH PRESENT OR MOST RECENT FIRST

CIRCLE HIGHEST GRADE COMPLETED: 6 7 8 9 10 11 12 13 14 15 16+

SCHOOL NAME	LOCATION	COURSE/DEGREE

HIGH SCHOOL: \_\_\_\_\_

LIST RELEVANT COMPUTER EQUIPMENT AND SOFTWARE, OFFICE EQUIPMENT, OR HEAVY DUTY EQUIPMENT YOU CAN USE. STATE YOUR SKILL LEVEL OR EXPERIENCE:

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This Employer complies with federal and state laws prohibiting discrimination in employment because of sex, age, race, color, religion, marital status, national origin, ancestry, medical condition, disability, and other protected categories, which are now named or may be added in the future.

### EMPLOYMENT HISTORY

Please list all employment for the last ten (10) years, beginning with the present or most current first. (Account for periods between jobs.)

DATE	NAME AND ADDRESS OF EMPLOYER	1. JOB TITLE 2. DEPARTMENT 3. NAME OF SUPERVISOR 4. SUPERVISOR'S TELEPHONE NUMBER	DESCRIBE MAJOR DUTIES	WAGES	REASON FOR LEAVING
FROM:		1.		STARTING	
<u>          </u>					
MO.            YR.				\$ _____	
TO:		2.		PER _____	
<u>          </u>					
MO.            YR.		3.		FINAL	
				\$ _____	
		4.		PER _____	
FROM:		1.		STARTING	
<u>          </u>					
MO.            YR.				\$ _____	
TO:		2.		PER _____	
<u>          </u>					
MO.            YR.		3.		FINAL	
				\$ _____	
		4.		PER _____	
FROM:		1.		STARTING	
<u>          </u>					
MO.            YR.				\$ _____	
TO:		2.		PER _____	
<u>          </u>					
MO.            YR.		3.		FINAL	
				\$ _____	
		4.		PER _____	
FROM:		1.		STARTING	
<u>          </u>					
MO.            YR.				\$ _____	
TO:		2.		PER _____	
<u>          </u>					
MO.            YR.		3.		FINAL	
				\$ _____	
		4.		PER _____	

Have you been convicted of a felony in the last seven (7) years?     Yes     No  
 (A prior conviction will not necessarily bar employment.)

**PRE-EMPLOYMENT STATEMENT**

I authorize investigations of all statements in this application. I further understand that any misrepresentation or omission of facts given may be cause for immediate discharge, if hired.

I accept that as a matter of company policy, employment is at the will of the employee and the employer and may be terminated at any time with or without cause or notice.

**APPLICANT'S SIGNATURE** \_\_\_\_\_

**DATE** \_\_\_\_\_