

Application for Employment

Date: _____

Federal and state laws prohibit discrimination in employment practices on account of race, color, religion, creed, national origin, ancestry, age, marital status, veteran status, non-job related disability or any other protected group status.

Please print

Name: _____
Last First Middle

Address: _____
Street City State Zip

Phone Number: _____

Do you have a legal right to be employed in the U.S.? Yes No

Are you over the age of 18? Yes No

Have you ever been convicted of a crime? Yes No

If yes, provide dates and details _____

How did you hear about us? Newspaper ad Company's website
 Employment agency Employee
 School Other _____

Job Interest

Position Desired: _____

Full Time Part Time (If part time, hours wanted) _____

Wages or Salary Desired: \$ _____ Per: _____

Other positions for which you are qualified? _____

Date available to begin working: _____

Were you ever employed by this organization? Yes No

If yes, When: _____ Where: _____

Rate of pay: _____ Position: _____

Reason for leaving: _____

Education

Fill in the information starting with the most recent school attended

Name of School City and State	Did you graduate?	Major	Degree	GPA

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Employment History

Fill in the information starting with your most recent employer.

COMPANY NAME		Dates Worked		Position(s) Held
		From	To	
Address, City, State, Zip				
Phone Number		Duties/Responsibilities		
Name of Supervisor				
Base Starting Wage	per <input type="checkbox"/> Hour	Ending/Current	per <input type="checkbox"/> Hour	Reason for Leaving
Gross Income \$	<input type="checkbox"/> Year	\$	<input type="checkbox"/> Year	
<input type="checkbox"/> Bonus		Amount Received		
<input type="checkbox"/> Incentives		\$		

May we contact this employer for a reference? Yes No

COMPANY NAME		Dates Worked		Position(s) Held
		From	To	
Address, City, State, Zip				
Phone Number		Duties/Responsibilities		
Name of Supervisor				
Base Starting Wage	per <input type="checkbox"/> Hour	Ending/Current	per <input type="checkbox"/> Hour	Reason for Leaving
Gross Income \$	<input type="checkbox"/> Year	\$	<input type="checkbox"/> Year	
<input type="checkbox"/> Bonus		Amount Received		
<input type="checkbox"/> Incentives		\$		

May we contact this employer for a reference? Yes No

COMPANY NAME		Dates Worked		Position(s) Held
		From	To	
Address, City, State, Zip				
Phone Number		Duties/Responsibilities		
Name of Supervisor				
Base Starting Wage	per <input type="checkbox"/> Hour	Ending/Current	per <input type="checkbox"/> Hour	Reason for Leaving
Gross Income \$	<input type="checkbox"/> Year	\$	<input type="checkbox"/> Year	
<input type="checkbox"/> Bonus		Amount Received		
<input type="checkbox"/> Incentives		\$		

May we contact this employer for a reference? Yes No

COMPANY NAME		Dates Worked		Position(s) Held
		From	To	
Address, City, State, Zip				
Phone Number		Duties/Responsibilities		
Name of Supervisor				
Base Starting Wage	per <input type="checkbox"/> Hour	Ending/Current	per <input type="checkbox"/> Hour	Reason for Leaving
Gross Income \$	<input type="checkbox"/> Year	\$	<input type="checkbox"/> Year	
<input type="checkbox"/> Bonus		Amount Received		
<input type="checkbox"/> Incentives		\$		

May we contact this employer for a reference? Yes No

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Employment History *cont.*

Account for all unemployment other than those due to personal injury, illness or disability.

Skills

Please list any skills that may be related to the job for which you are applying.

Computer skills _____

Word Processing _____

Software Packages _____

Programming Languages _____

Other _____

References

Please list three work references. If not applicable, please list three personal references other than a relative.

Name	Relationship to You	Address	Phone Number

Other Job Related information

Are there any organizations that you belong to that are job related? (Do not list any organizations that would reveal race, color, religion, creed, national origin, ancestry, age, marital status, veteran status, non-job related disability or any other protected group status.)

List any awards, publications or special accomplishments (Do not list any that would reveal race, color, religion, creed, national origin, ancestry, age, marital status, veteran status, non-job related disability or any other protected group status.)

Applicant Must Read and Sign

I hereby affirm that the information provided on this application is true and complete. I also understand that any omission or misrepresentation of information provided may result in my rejection or termination from employment.

I authorize the Company to contact and obtain information from all references listed and release any employers or persons listed from liability for any damages from furnishing such information.

In the event of my employment with the Company, I will comply with all of the rules and policies of the employer. I understand that if I am employed, my employment will be at-will for no set period of time, and that my employment may be terminated for any reason at any time by either me or the Company.

This certifies that I have read and fully understand the above statement.

Applicant Signature _____ Date _____