

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other legally protected status.

**** PLEASE PRINT CLEARLY****

Position(s) applied for	Date//			
How did you find out about this job?				
Why are you seeking a new job at this time?				
Applicant Information				
First NameMiddle	Last			
Street Address				
City / State / Zip	Phone ()			
If hired, do you have a reliable means of transportation to g	et to work?Describe			
Are you at least 18 years old If you are under 18 years	of age, can you furnish a work permit?			
Are you legally eligible for employment in the U.S.?	(Proof of U.S. citizenship or immigration			
status is required if hired)				
Have you ever been convicted of a crime? □ Yes □ No If tion of the case. Include dates & places. (Note: The existence automatic bar to employment.)				
I provide consent for a 3rd party background check 🛛				
Employment Information				
Are you seeking full, part or temporary employment?				
What hours & shift(s) are you available to work?				
What hours & shifts are you not available to work?				
Are you currently employed? If hired, when would ;	you be able to start?			
List any friends or relatives employed by this company?				
Have you ever been discharged or asked to resign from any				

If applicable, please refer to the attached job description for which you are applying. Are you able to perform all these tasks with or without reasonable accommodation? ____ Please describe which tasks, if any, you will need accommodation to perform, & explain what type of accommodation you will need:

Education (Circle highest level achieved)

	entary: 1 2 3 4 5 6 7 8	·	: 9 10 11 12 G.E.D.	
Name of School: 1		Name of S	Name of School:	
Loca	tion:	Location:		
Colle	ge: 1 2 3 4 5 6 7 8			
Name	e of School:		Location of School:	
Degr	ee & Major:		Minor:	
Wor	∙k History			
1.	Company		_ Phone Number ()	
	Address			
	Date of Employment: From_			
	Supervisor's Name & Title		May we contact supervisor? 🗆 Yes	
	Describe duties briefly:			
2.	Company		_ Phone Number ()	
	Address		City/State/Zip	
	Date of Employment: From_	To	Job Title	
	Supervisor's Name & Title		May we contact supervisor?	
	Describe duties briefly:			
	Specific reason for leaving:			
3.	Company		Phone Number ()	
3.	Company Address			
	Date of Employment: From			
	Supervisor's Name & Title			
	Specific reason for reavilig:			
For re	eferences purposes: Have you w	orked for an	y of these organizations or attended school under a dif-	

ferent name?_____ If yes, give name & organizations)_____

Authorizations & At-Will Employment Agreement

(please read carefully, then sign and date below)

I certify that I have personally completed this application. I declare that the information provided in this employment application is true and complete and 1 understand that any false information or significant omissions may disqualil' me from further consideration for employment and may be justification form my dismissal from employment if discovered at a later date. I agree to immediately notify this company if! should be convicted of a crime while my job application is pending or during my employment, if hired.

I authorize this company to make an investigation of all information contained in this employment application and I release from liability all companies and corporations supplying such information. I understand any false answers, statements, or implications made by me on this application or other required documents shall be considered sufficient cause for denial of employment or discharge.

I specifically authorize and direct my current and former employers to supply employment-related information to this company and do hereby release my current and former employers from liability for providing information to this company.

Upon termination of my employment for whatever reason, I release this company from all liability for supplying any information concerning my employment to any potential employer.

I authorize this company, if applicable, to request a copy of my credit report, motor vehicle driving record, and any other investigative report deemed necessary through various third party sources. As required by law, upon request within a reasonable period of time, I will be notified as to the nature and scope of such investigations.

I hereby agree to submit to any drug test required of me, whether prior to my employment or if employed by this company at any time thereafter. If requested, I will take a post-job offer physical examination and my employment, in the event! receive medical treatment for any condition, including a physical, psychological, emotional, or psy-chiatric condition that is job-related, I hereby authorize the limited release and exchange of such medical information relating to my condition between the treatment provider and a company-designated physician.

AT-WILL EMPLOYMENT AGREEMENT I understand and agree that nothing contained in this application, or conveyed during any interview is intended to create an employment contract between the company and me. In addition, I understand and agree that if you employ me, in consideration of my employment, my employment and compensation will be at-will, for no definite period of time, and may be terminated at an' time, for any reason, or for no reason at all. I understand that only the company's President is authorized to change the employment-at-will status and such a change can only be done in writing. I have read, understand, and agree to the above.

Signature :

Date

Name: (Please Print)