



APPLICATION

If you need any help to fill out this application form, please notify the person who gave you this form, Every effort will be made to have someone help you in a reasonable amount of time.

EMPLOYMENT DESIRED

Position applying for (be specific) _____

Date you can start ____ / ____ / ____ Wage Rate Expected _____

PERSONAL INFORMATION

Print Full Name: _____

First

Middle

Last

Present Address: _____

Number & Street

City

State

Zip

Social Security No. _____ - _____ - _____

Phone Number: () _____ - _____

Are you 21 years or older? Yes No

If not, what is your birth date? ____ / ____ / ____

(If required in your state, you may have to furnish a work permit)

Have you ever been convicted of a felony or misdemeanor? Yes No If yes, please explain. (A conviction will not necessarily be a bar to employment. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account.)

Are you legally eligible for employment in the U.S.? Yes No

Federal Law requires that a new employee must supply documents that prove identity and employment eligibility (e.g. Driver's License and Social Security Card or Birth Certificate) within 3 business days of hire. Because of the importance of this requirement, we must include it as a condition of employment.

- Other documents may be used to meet this requirement. Please request information from the manager.

AVAILABILITY

Total hours available per week _____ Shift applied for _____

Do you have a way to get to and from work? Yes No

Please indicate the time your are available for each work day.

DAY	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Continues on other side

EDUCATION/TRAINING

Circle last year of education completed.

Grade School 9 10 11 12 13 14 15 16 17 18 19 20

High School attended _____ City, State _____

EMPLOYMENT HISTORY

List 3 most recent jobs, military service and self employment in the USA, beginning with the present and working backwards. May we contact your present employer? Yes No

► Employer's Name _____

Street _____ City _____ State _____ Zip _____

Phone () _____ - _____ Job Title _____

Dates of Employment: From ____ / ____ / ____ To ____ / ____ / ____ Avg. No. Hrs./Week _____

Wage Rate: Starting _____ Ending _____ How Paid: Hourly Salaried

Duties & Responsibilities _____

Reason for leaving? _____

► Employer's Name _____

Street _____ City _____ State _____ Zip _____

Phone () _____ - _____ Job Title _____

Dates of Employment: From ____ / ____ / ____ To ____ / ____ / ____ Avg. No. Hrs./Week _____

Wage Rate: Starting _____ Ending _____ How Paid: Hourly Salaried

Duties & Responsibilities _____

Reason for leaving? _____

► Employer's Name _____

Street _____ City _____ State _____ Zip _____

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Dates of Employment: From ____ / ____ / ____ To ____ / ____ / ____ Avg. No. Hrs./Week _____

Wage Rate: Starting _____ Ending _____ How Paid: Hourly Salaried

Duties & Responsibilities _____

Reason for leaving? _____

APPLICANT STATEMENT

Please read the following statements carefully:

1. I certify that the answers given herein are true and complete to the best of my knowledge and are subject to confirmation by Riverwatch.
2. I hereby acknowledge notification, in compliance with the Fair Credit Reporting Act, that Riverwatch may make such investigations and inquiries of my personal, employment, financial, and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and all other persons contacted from all liability.
3. In the event of employment, I understand I am applying for employment which can be terminated at will by either myself or Riverwatch at any time and that nothing contained in any application, manual, brochure, or other Riverwatch materials shall be constitute an implied or expressed contract of employment. I also acknowledge that Riverwatch may request previous employment information to evaluate my qualifications for employment. I understand that false or incomplete information in an application for employment is grounds for dismissal and forfeiture of all related benefits. I understand that I am required to abide by all company rules and regulations.
4. I also understand and agree that Riverwatch supports the Drug Free Workplace concept and as such may require me to submit to a drug test as a condition of employment or continued employment. These drug tests may be administered at any time. Refusal to submit to any drug test will disqualify an applicant or will result in termination of employment.

Signature _____ Date _____