



Application for Employment

Name: _____ Date: _____

Address: _____

Telephone Number: _____ Email Address: _____

Are you 23 years of age or older?

Yes No

Are you either a U.S. citizen or an alien authorized to work in the U.S.?

Yes No

Do you have a valid Driver's License with Zero Points?

Yes No

Position Desired

Position: _____ Start date available: _____

Wage rate desired: \$ _____ Hourly Monthly Annually

Do you prefer: Full-time Part-time If part-time, hours per week desired: _____

Hours you are available to work: _____

Days of week you are available to work: _____

Are you able to work: Weekends

Holidays

Nights

How did you learn about this opening? _____



Education

High School:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
Technical School:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
College/University:	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Course of Study:
Other education, training or special skills:		

Work Experience

Please list all previous employment, beginning with the most recent.		
Employer:		Address:
From	To	Position Held:
		Reason for Leaving:
Supervisor's Name & Title:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:		
Starting Compensation:		Final Compensation:
Employer:		Address:
From	To	Position Held:
		Reason for Leaving:
Supervisor's Name & Title:		May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of Duties:		
Starting Compensation:		Final Compensation:



References

Identify three persons who know your work, beginning with the most recent.

Name: _____ Phone Number: _____

Email: _____

Address: _____ City _____ State: _____

Position or Title: _____ Years Known: _____

Name: _____ Phone Number: _____

Email: _____

Address: _____ City _____ State: _____

Position or Title: _____ Years Known: _____

Name: _____ Phone Number: _____

Email: _____

Address: _____ City _____ State: _____

Position or Title: _____ Years Known: _____

Authorization and Acknowledgements

I affirm that the information I have provided in this application is true to the best of my knowledge, information and belief, and I have not knowingly withheld any information requested. I understand that withholding or misstating any information requested in this application is grounds for rejection of my application, and that providing false or misleading information in this application is grounds for discharge.

Candidate's Signature

Date