



## Application for Employment

Date:	Referred By:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary
Desired Position: † <input type="checkbox"/> Check-In <input type="checkbox"/> Grinding <input type="checkbox"/> Laboratory <input type="checkbox"/> Mapping <input type="checkbox"/> Field		

† Some positions require a valid driver's license. The applicant will need to provide proof that (s)he has a valid driver's license when offered employment.

### Personal

Name:			
Street:	City:	State:	Zip:
Primary Phone:	Secondary Phone:	Email:	

### Questionnaire

If you are under 18 years of age, can you provide required proof of your eligibility to work?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently employed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
May we contact your present employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date available for work: ___/___/_____ What is your desired salary range? _____	
Are you currently on "lay-off" status and subject to recall?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Can you travel if a job requires it?	<input type="checkbox"/> Yes <input type="checkbox"/> No

### Education

Name & Location	From	To	Major / Degree / Diploma	Year Graduated
High School:				
College:				
Other:				

### Special Skills or Training


### Employment (Start with most recent)

Employer:	Phone:	
From:	To:	Job Title:
Duties:		
Supervisor's Name:	Starting Salary:	Ending Salary:
Reason for leaving:		

Employer:	Phone:	
From:	To:	Job Title:
Duties:		
Supervisor's Name:	Starting Salary:	Ending Salary:
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Duties:		
Supervisor's Name:	Starting Salary:	Ending Salary:
Reason for leaving:		

**Personal References**

Name	Phone

**Applicant's Statement**

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 60 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at-will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all results and regulations of the employer.

\_\_\_\_\_

Signature of Applicant

\_\_\_\_\_

Date

**For Personnel Department Use Only**

Arrange Interview: <input type="checkbox"/> Yes <input type="checkbox"/> No		Date: ____ / ____ / _____
Interviewed By:		Date: ____ / ____ / _____
Remarks:		
Hired: <input type="checkbox"/> Yes <input type="checkbox"/> No		Date: ____ / ____ / _____
Job Title:	Hourly Rate / Salary:	Department:
Hired By:		