

Application for Employment

Applicants are considered without regard to race, color, religion, sex, national origin, age, marital or veteran status, presence of a non-job-related medical condition or handicap, or any other legally protected status. EOE.



**Applicants must be at least 18 years old and have a high school diploma or GED.
Please do not apply if you do not meet these qualifications.**

(Please Print)

| | | | | |
|--|-----------------------------|--------------------------------------|---|------------|
| Last Name | | First Name | | Date |
| Address | | | City, Zip | Home Phone |
| Social Sec. # | Position Desired | | Pay Expected | Work Phone |
| Are you legally eligible for employment in the U.S.? | When can you begin working? | Will you work overtime if requested? | Mobile Phone | |
| Are you currently employed? | Do you smoke? | Do you have reliable transportation? | Do you know anyone who works/worked for us? | |
| What days (Monday-Friday) can you work? | | | What hours (7am-6pm) can you work? | |

Education

| | Name of School and Location (City, State) | Course of Study | # of Years Completed | Degree or Diploma |
|-------------|---|-----------------|----------------------|-------------------|
| High School | | | | |
| Trade/Tech | | | | |
| College | | | | |
| Graduate | | | | |
| Other | | | | |

| |
|---|
| Other special training or skills |
| What foreign languages do you speak fluently? |
| Membership in Professional/Civic Organizations (Exclude any which may disclose race, religion or national origin) |
| Any special job-related skills or qualifications |
| Do you have any physical condition which might limit your ability to lift children or perform any function of the job you are applying for? |
| Have you been convicted of a felony? |
| Describe any major illness or injury you have had in the past five years |

Employment Experience (Present, or most recent, job first)

| | |
|-------------------------------|---|
| Company Name | Telephone # () |
| Address City / State / Zip | Dates Employed From / To / |
| Supervisor | Hourly Pay Rate Starting \$ Final \$ |
| Job Title(s) | Reason for Leaving |
| Description of Work | |

| | |
|-------------------------------|---|
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| Description of Work | |

Have you omitted any jobs you have ever had from the list above?

Personal / Professional References (other than Relatives or Previous Employers)

| Name / Occupation | Name / Occupation | Name / Occupation |
|----------------------------|----------------------------|----------------------------|
| Address | Address | Address |
| City / State / Zip | City / State / Zip | City / State / Zip |
| Telephone # () | Telephone # () | Telephone # () |
| E-mail Address | E-mail Address | E-mail Address |
| Relationship / Years Known | Relationship / Years Known | Relationship / Years Known |

I have received and read the Job Description for the position that I am applying for and agree that I meet the Physical Requirements for this job as listed.

Signed:

Applicant's Statement

The information given in this Application is true, correct and complete. If employed, any false or misleading information or omission of facts might result in discharge. I authorize investigation of all information I have given and of my credit, personal and employment history, as may be necessary in making an employment decision. I understand that any employment I accept does not create a contractual obligation upon the employer to continue my employment in the future. I understand I am required to abide by all rules and regulations of the employer.

Signed: