



70 E. Horizon Ridge Pkwy #180  
 Henderson, NV 89002  
 Phone: (702) 856-0422  
 Fax: (702) 433-0425

## Employment Application

Application Date: \_\_\_\_\_

This company is an equal opportunity employer and will not discriminate in the hiring process because of sex, religion, race, color, age, national origin, or disabilities.

### PERSONAL INFORMATION

Last Name	First	Middle Initial	Social Security Number
Street Address			Home Phone ( )
City, State, Zip			Business Phone ( )
Are you 18 years or older? Please circle one. <b>YES</b> <b>NO</b>		Are you legally eligible for employment in the United States? Please circle one. <b>YES</b> <b>NO</b>	
E-mail			

### EMPLOYMENT INTEREST

Position: \_\_\_\_\_ Salary Desired? \_\_\_\_\_

Date you can start? \_\_\_\_\_ Can you work overtime if necessary?    **YES**    **NO**

Have you ever applied for employment with this company before?    **YES**    **NO**    If yes, when? \_\_\_\_\_

### EDUCATION AND TRAINING

School	Name and Location of School	Course of Study	No. of years completed	Did you Graduate?
High				<b>Yes</b> <b>No</b>
Trade or Business				<b>Yes</b> <b>No</b>
College				<b>Yes</b> <b>No</b>
Graduate				<b>Yes</b> <b>No</b>
Other				<b>Yes</b> <b>No</b>
License or Certificate Training				<b>Yes</b> <b>No</b>

## EMPLOYMENT HISTORY

(list below the last three employers, starting with the last one first)

Company Name	Employed ( state Month and Year)
Address and Telephone	Pay or Salary
State Job Title and Describe Your Work	Reason for Leaving
Company Name	Employed ( state Month and Year)
Address and Telephone	Pay or Salary
State Job Title and Describe Your Work	Reason for Leaving
Company Name	Employed ( state Month and Year)
Address and Telephone	Pay or Salary
State Job Title and Describe Your Work	Reason for Leaving

## MILITARY SERVICE RECORD

Have you served in the United States Armed Forces?      YES      NO

Date of Entry: \_\_\_\_\_      Branch of Service: \_\_\_\_\_

Date of Discharge: \_\_\_\_\_      Final Rank: \_\_\_\_\_

Indicate service school attended or special training received: \_\_\_\_\_

## REFERENCES

(Do not list Relatives or Former Employers)

Name	Address	Telephone	Years Known	Occupation
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

## CERTIFICATE OF APPLICANT

I HEREBY ATTEST that all statements made in this application are true and correct to the best of my knowledge. I understand and agree that any deception, fraud or my providing false or misleading statements of material facts in this application or examination process may cause the forfeiture of all rights to any employment or immediate termination if discovered after starting employment.

Signature of Applicant: \_\_\_\_\_

