

APPLICATION FOR EMPLOYMENT

INSTRUCTIONS: We appreciate your interest in our organization. A clear understanding of your background and work history will help us place you in a mutually beneficial job position. We consider applicants for all positions without regard to race, color, religious creed, age, sex, marital status, ancestry, military service, disability (mental & physical) including HIV and AIDS, medical condition (cancer), denial of Family & Medical Care Leave, or denial of pregnancy Disability Leave.

PERSONAL INFORMATION

DATE _____

NAME _____

STREET ADDRESS _____

CITY _____

STATE _____

ZIP CODE _____

PHONE NUMBER _____

ALTERNATE PHONE NUMBER _____

ANY OTHER NAME (S) UNDER WHICH YOU HAVE BEEN PREVIOUSLY EMPLOYED OR UNDER WHICH SCHOOL RECORDS WOULD BE LOCATED _____

NAMES OF FRIENDS OR RELATIVES EMPLOYED BY THIS ORGANIZATION _____

Are you under 18 years of age? Yes No

If so, can you furnish a work permit? Yes No

Have you ever been employed with us before? Yes No If yes, give dates. _____

Are you a citizen of the U.S., or do you have a valid work permit? Yes No

Do you have any restrictions or obligations that would prevent you from working overtime? Yes No

Do you have any restrictions or obligations that would prevent you from working consistently or arriving to work on time? Yes No

Have you ever been convicted of a crime? (Conviction will not necessarily disqualify an applicant) Yes No
If yes, please list offenses and dates of dispositions. _____

Have you ever had any job-related training in the United States military? Yes No
If yes, please describe: _____

EMPLOYMENT DESIRED

Position: _____ Date available: _____

Are you available to work: Full Time Part Time Shift Work

Can you travel if the job requires it? Yes No Are there any restrictions? Yes No
What are they? _____

EDUCATION

Grade/Level	Name of School	Address	# of Years	Degree
High School				
College				
Trade, Business or Correspondence School				

Professional organizations and/or licenses that may be job related: _____

Personal References: Give name, address, and a telephone number of the three references who are qualified to evaluate your capabilities and who are not related to you and are not previous employers.

1. _____
2. _____
3. _____

EMPLOYMENT EXPERIENCE-List below your last five employers, beginning with the most recent.

Month/Year	Name and address of employer	Rate of pay	Position	Reason for leaving

Applicant's Statement

I UNDERSTAND THIS EMPLOYMENT APPLICATION IS NOT TO BE CONSTRUED AS A GUARANTEE OF EMPLOYMENT FOR A SPECIFIC TIME. I FURTHER UNDERSTAND THAT, SHOULD I BECOME EMPLOYED, MY EMPLOYMENT WITH THE ORGANIZATION DOES NOT CONSTITUTE ANY FROM OF CONTRACT, IMPLIED OR EXPRESSED, AND SUCH EMPLOYMENT WILL BE TERMINABLE AT WILL EITHER BY ME OR BY MY EMPLOYER UPON NOTICE OF ONE PARTY TO THE OTHER.

I AUTHORIZE THE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR MISSION OF FACTS CALLED FOR IS A CAUSE FOR DISMISSAL.

Signature of Applicant

Date