

EMPLOYMENT APPLICATION

We are an equal opportunity employer. All applicants are considered without regard to race, age, color, gender, ethnic group, national origin, religion, citizenship, marital status, sexual orientation, veteran status, physical or mental disability, or medical condition.

PERSONAL INFORMATION						
Last Name	First	Middle Initial	Today's Date			
Address					SS#	
Home Telephone () ()	Work Telephone () ()	Email			Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have any relatives employed by this company or its affiliates? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide name(s), location(s), and position(s):						
EMPLOYMENT DESIRED						
Position Applied for			Desired Pay		Start Date	
How did you find out about this position?						
Would you like to work (check all that apply) <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal <input type="checkbox"/> Temporary <input type="checkbox"/> Educational Co-Op						
What times are you available to work?						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
EDUCATION						
Level	Name & Address	Did you Graduate? Degree / Level Completed	Major Studies	Degree/Diploma License/Certificate		
High School						
College						
Graduate School						
Vocational, Other						
MILITARY						
Branch	Dates of Service	Final Rank	Assignment			
Are you now a member of the National Guard? <input type="checkbox"/> Yes <input type="checkbox"/> No						
REFERENCES						
Name	Company / Position			Phone		
				Years Known		
Name	Company / Position			Phone		
				Years Known		
Name	Company / Position			Phone		
				Years Known		

SKILLS (not all may be necessary for the job you seek)Do you type? Yes No If yes, what is your WPM?

Foreign Languages

Computer Skills (Hardware/Software)

Other Skills, Knowledge, Areas of Expertise

EMPLOYMENT HISTORYList all jobs for the last 10 years starting with the most recent, account for gaps in employment. Attach additional pages if needed.
Complete this section even if you have included a resume with your application.

Dates	Employer Name and Address	Supervisor Name and Job Title	Phone #
Job Title			Salary Start: End:
Duties, Responsibilities, Promotions			Reason for Leaving
Dates	Employer Name and Address	Supervisor Name and Job Title	Phone #
Job Title			Salary Start: End:
Duties, Responsibilities, Promotions			Reason for Leaving
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Job Title			Salary Start: End:
Duties, Responsibilities, Promotions			Reason for Leaving

GENERALAre you currently employed? Yes No If yes, may we contact your present employer? Yes NoWill you be able to perform the job functions for the position you are applying for with or without reasonable accommodation? Yes NoHave you ever been convicted of a crime (other than a minor traffic violation)? Yes No If yes, explain:If offered employment, will you be able to provide proof of identity and authorization to work in the U.S.? Yes No**APPLICANT STATEMENT**

I understand and agree to the following: This application is not a contract of employment. The company follows an "at will" employment policy, meaning I or The Company may terminate employment at any time for any reason consistent with applicable law. I authorize investigation of all statements given on this application. The company may contact any educational institution, reference, or employer listed on this application, except my current employer if so noted, to verify the information I have given. I hereby release all involved parties from any liability arising from such an investigation. Should The Company hire me and should any of the information I have given in this application be found false, misleading, or incomplete, I shall be subject to dismissal. All hired persons must provide proof of identity and authorization to work in the US. Failure to produce such proof will result in denial of employment.

I certify that all the information given in this application is complete and true.

Signature of Applicant_____
Date