



APPLICATION FOR EMPLOYMENT

AN EQUAL OPPORTUNITY EMPLOYER

We do not discriminate on the basis of race, color, religion, national origin, sex, age, or disability. It is our intention that all qualified applicants be given an equal opportunity and that selection decisions be based on job-related factors.

Each question should be fully and accurately answered. No action can be taken on this application until all questions have been answered. Use blank paper if you do not have enough room on this application. PLEASE PRINT, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

Job for which you are applying _____ Other Positions Desired _____

Are you seeking: Full-time Part-time Temporary employment? Minimum Earnings Required _____

When could you start work? _____

Home Telephone Number	Business Telephone Number	Email Address	
_____	_____	_____	

_____	_____	_____
Last Name	First Name	Middle Initial

_____	_____	_____	_____
Present Street Address	City	State	Zip Code

If you are under 18 years of age, can you provide required proof of your eligibility to work Yes No

Are you legally authorized to work in the United States for any employer?..... Yes No

Will you now, or in the future, require sponsorship for employment VISA status? Yes No

Have you ever applied here before? Yes No If yes, when? _____

Were you ever employed here? Yes No If yes, when? _____

Referred for Employment by (agency, ad, etc.): _____

Please list ALL staffing agencies you have signed with in the past 12 months: _____

Are you currently employed? Yes No May we contact your former/current employer? Yes No

For Driving Jobs Only:

Do you have a valid driver's license? Yes No

Have you had your driver's license suspended or revoked in the last three years? Yes No

If yes, give details _____

List professional, trade, business or civic activities and offices held. (Exclude labor organizations and memberships which reveal race, color, religion, national origin, sex, age, disability or other protected status.) _____

EDUCATION	Number of years Completed	Diploma/Degree/ Certificate	Major Field of Study
List Name & Address of Schools			
High School or GED: _____			
College or University: _____			
Graduate School: _____			
Vocational or Technical: _____			
What skills or additional training (machines or equipment you can operate) do you have that are related to the job for which you are applying?			

List names of employers in consecutive order with **present or last employer listed first**. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.
PLEASE GIVE MONTH & YEAR

Name of Employer		Job Title & Duties	
Address		Dates of Employment: From	To
City, State, Zip Code		Reason for Leaving	
Supervisor/Title	Telephone		
Name of Employer		Job Title & Duties	
Address		Dates of Employment: From	To
City, State, Zip Code		Reason for Leaving	
Supervisor/Title	Telephone		
Name of Employer		Job Title & Duties	
Address		Dates of Employment: From	To
City, State, Zip Code		Reason for Leaving	
Supervisor/Title	Telephone		

I affirm that the information provided in this application (and any accompanying resume) is true and complete to the best of my knowledge and agree that any falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I voluntarily authorize the Company to obtain from persons, schools, current and/or past employers, and other organizations, information that may be required to arrive at an employment decision, and release from all liability and responsibility all such persons, schools, companies, corporations, or other organizations supplying such information.

If employed, I will obey all Company rules, regulations, and employment policies. I agree to wear protective clothing or any other self-protection equipment as required, and to comply with safety rules. I hereby consent to a pre and/or post-employment drug screen and background check as a condition of employment, if required.

I UNDERSTAND THAT THIS APPLICATION OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE A CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE.

I acknowledge that I have read and understand the above conditions

Signature _____ Date _____