

Employment Application

We consider applicants for all positions on the basis of qualifications and without regard to race, religion and reasonable accommodation, color, sex and breastfeeding, gender identity or expression, sexual orientation, national origin, ancestry, citizenship status, uniform service member status, marital status, pregnancy, age, a diagnosis or history of cancer, disability, genetic characteristics or any other category protected by applicable federal, state, or local laws.

PLEASE PRINT

Position(s) Applied For	Date of Application
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Last Name	First Name	Middle Name
Address Number	Street	City State Zip Code
Telephone Number(s) where we can contact you:		
Home: ()	Work: ()	Cell: ()
Email address:		

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

Have you ever been employed with the company before? Yes No

If yes, please give date: _____

Are you currently employed? Yes No

May we contact your present employer for references? Yes No

Do you have the right to work in the United States? Yes No

On what date would you be available for work? _____

Salary Desired? _____

EDUCATION

	High School	College	Other
School Name and Location			
Years Completed	9 10 11 12	1 2 3 4	
Diploma Degree	Yes No	Yes No	

References

Give name, address, and telephone number of three business references who are not related to you.

1.

2.

3.

Employment Experience

Start with your present or most recent position.

1. Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)			
Job Title			
Supervisor			
Reason for Leaving			
2. Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)			
Job Title			
Supervisor			
Reason for Leaving			

3. Employer	Dates Employed		Work Performed
Address			
Telephone Number(s)			
Job Title			
Supervisor			
Reason for Leaving			
4. Employer	Dates Employed		Work Performed
Address	From	To	
Telephone Number(s)			
Job Title			
Supervisor			
Reason for Leaving			

I certify that the answers given herein are true and complete to the best of my knowledge. I also authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written documentation or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Employer.

Signature of Applicant

Date