



EMPLOYMENT APPLICATION

Date of Application _____

PERSONAL INFORMATION

Name _____
Address _____
City _____ State _____ Zip _____
Home Phone _____ Office Phone _____ Cell Phone _____
Email Address _____ Social Security Number _____ - _____ - _____
If under 18, please list age _____

BACKGROUND INFORMATION

For what position are you applying? _____ Salary Desired \$ _____
How did you learn about the position? _____
Days/hours available to work (please be specific):
Mon _____ Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____ Sun _____
How many hours can you work weekly? _____ Can you work nights? ___ Yes ___ No
Employment desired (check all that apply): ___ Full-Time ___ Part-Time ___ Temporary ___ Permanent
On what date would you be available for work? _____
Are you a U.S. citizen, or otherwise authorized to work in the U.S. without any restriction? ___ Yes ___ No
Have you ever been convicted of a felony? ___ Yes ___ No If yes, please describes circumstances: _____

Have you ever been involuntarily terminated or asked to resign? ___ Yes ___ No
If yes, please describe circumstances: _____

If selected, are you willing to submit to a pre-employment drug screening test? ___ Yes ___ No
If selected, are you willing to submit to a pre-employment background screening? ___ Yes ___ No



EMPLOYMENT HISTORY

(Please list most recent first)

Job Title(s) _____	Dates Employed _____		
Employer _____			
Address _____			
City _____	State _____	Zip _____	Phone _____
Supervisor _____	Starting Salary _____	Ending Salary _____	
Duties Performed _____			

Reason for Leaving _____			

Job Title(s) _____	Dates Employed _____		
Employer _____			
Address _____			
City _____	State _____	Zip _____	Phone _____
Supervisor _____	Starting Salary _____	Ending Salary _____	
Duties Performed _____			

Reason for Leaving _____			

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Employer _____			
Address _____			
City _____	State _____	Zip _____	Phone _____
Supervisor _____	Starting Salary _____	Ending Salary _____	
Duties Performed _____			

Reason for Leaving _____			

Job Title(s) _____	Dates Employed _____		
Employer _____			
Address _____			
City _____	State _____	Zip _____	Phone _____
Supervisor _____	Starting Salary _____	Ending Salary _____	
Duties Performed _____			

Reason for Leaving _____			



EDUCATION

School Name	Location	Years Attended	Degree Received	Major
Other training, certifications, or licenses held:				

List other information pertinent to the employment you are seeking: _____

ACKNOWLEDGMENT AND AUTHORIZATION

All potential employees are evaluated without regard to race, color, religion, gender, national origin, age, marital or veteran status, the presence of a non-job related handicap or any other legally protected status.

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

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 document 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 of Signature