

Employment Application

Date _____

Name _____ Social Security No. _____
Last First Middle Initial

Present Address: _____
No. Street City State Zip

Telephone No: (____) _____ Position Applied For: _____

Do you want to work Full-time Part-time _____
 Specify days and hours if Part-time

Have you worked for us before? Yes No If yes, where? _____

When _____ Who was your supervisor? _____

How did you learn of this position? _____

If hired, on what date will you be available to start work? _____

Are you at least eighteen (18) years of age? Yes No

Are you a United States Citizen or authorized to work in the United States Yes No

If not, can you submit a work permit Yes No

If hired, according to the immigration Reform and Control Act of 1986 you will be required to submit proof of citizenship or work authorization

Have you been convicted of a felony within the last five (5) years Yes No

If yes, please explain the conviction _____

(The existence of a criminal record does not create an automatic barrier to employment)

Education and Training

Name of School and Location	Circle Last Year Completed	Did you Graduate?	Degree Received	Major Subjects Studied
High School Name: _____ Address: _____	1 2 3 4	Yes No <input type="checkbox"/> <input type="checkbox"/>		<input type="checkbox"/> General <input type="checkbox"/> Commercial <input type="checkbox"/> College Prep <input type="checkbox"/>
College Name: _____ Address: _____	1 2 3 4	Yes No <input type="checkbox"/> <input type="checkbox"/>		
Graduate School Name: _____ Address: _____	1 2 3 4	Yes No <input type="checkbox"/> <input type="checkbox"/>		
Business College Name: _____ Address: _____	1 2 3 4	Yes No <input type="checkbox"/> <input type="checkbox"/>		
Trade School Name: _____ Address: _____	1 2 3 4	Yes No <input type="checkbox"/> <input type="checkbox"/>		
List Specific Job Skills & Machines or Equipment you can operate: _____				

References (Do Not Include Relatives)

Name & Occupation	Address	Phone Number



Prior Work History

(List in the order, last or present employer first. Attach additional sheet if necessary)

Dates		Employer Name, Address, & Telephone Number	Rate of Pay		Supervisors Name, Title, & Phone Number	Your Title
Start	End	Name:	Start	Finish	Name:	
		Address:			Title:	
		Telephone:			Number:	
Describe in Detail the work you did: _____						
Reason for Leaving:						

Dates		Employer Name, Address, & Telephone Number	Rate of Pay		Supervisors Name, Title, & Phone Number	Your Title
Start	End	Name:	Start	Finish	Name:	
		Address:			Title:	
		Telephone:			Number:	
Describe in Detail the work you did: _____						
Reason for Leaving:						

Dates		Employer Name, Address, & Telephone Number	Rate of Pay		Supervisors Name, Title, & Phone Number	Your Title
Start	End	Name:	Start	Finish	Name:	
		Address:			Title:	
		Telephone:			Number:	
Describe in Detail the work you did: _____						
Reason for Leaving:						

If we contact the employers listed above? ____ If not, indicate below which one(s) you do not wish us to contact.

**Please Read Carefully
Applicants Certification & Agreement**

I certify that the facts set forth in this Employment Application are true and completed to the best of my knowledge. I understand that if I am employed omissions, false or misleading statements on this application shall be considered sufficient grounds for dismissal. You are hereby authorized to make any investigation of my personal history through any investigative agency or bureau of your choice. I release and waive any claims I may have against people and organizations as a result of their good faith compliance with information requests. However, I will be advised if an investigative report is filed. I understand and agree that if employment is offered to me and I accept employment, my employment may be terminated at will at any time, with or without cause and with or without notice, by myself or by the company and that no employee or officer has the authority to promise me employment for any specific period of time. I understand that any employment would be governed by the policies and procedures of the company in effect from time to time.

I understand that during my employment there may be times when my personnel file needs to be transferred to a party in another country or from that country to the United States. I hereby grant the Company explicit permission to make such a transfer.

Signature of Applicant	Date