



Application for Employment

It is the policy of the company to provide equal opportunity with regard to all terms and conditions of employment. The company complies with federal and state laws prohibiting discrimination on the basis of race, color, religion, sex, national origin, disability, veteran status, age, or any other protected characteristic.

GENERAL INFORMATION

Last Name First Middle  
Street Address  
City State Zip Code  
SS# Phone: ( ) -  
Email Address  
Position Applied For:

FOR OFFICE USE ONLY:  
Interview Scheduled: \_\_\_/\_\_\_/\_\_\_  
Position: \_\_\_\_\_  
Hire Date: \_\_\_/\_\_\_/\_\_\_ Rate \_\_\_\_\_  
Notes:

Special training or skills that would benefit you in the position for which you are applying:

Would you accept full-time work? Yes / No Would you accept part-time work? Yes / No  
On what date would you be available for work? \_\_\_\_\_  
Have you ever been employed here? Yes/ No If yes, dates: \_\_\_\_\_  
Are you legally eligible for employment in the United States? Yes / No (If yes, proof is required if hired.)  
If you are under 18 years old, can you provide a work permit if required? Yes / No / n/a

EDUCATIONAL BACKGROUND

High School: \_\_\_\_\_ Location: \_\_\_\_\_  
Course of Study: \_\_\_\_\_ Did you graduate? Yes / No Degree or Diploma: \_\_\_\_\_  
College: \_\_\_\_\_ Location: \_\_\_\_\_  
Course of Study: \_\_\_\_\_ Did you graduate? Yes / No Degree or Diploma: \_\_\_\_\_  
Graduate School: \_\_\_\_\_ Location: \_\_\_\_\_  
Course of Study: \_\_\_\_\_ Did you graduate? Yes / No Degree or Diploma: \_\_\_\_\_  
Vocational Training/Other: \_\_\_\_\_ Location: \_\_\_\_\_  
Course of Study: \_\_\_\_\_ Did you graduate? Yes / No Degree or Diploma: \_\_\_\_\_  
Continuing Education: \_\_\_\_\_

**EMPLOYMENT EXPERIENCE**

Place an **X** by the employer(s) you **DO NOT** want us to contact. List your most recent employer first.

Employer \_\_\_\_\_ Contact Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone (    )    - \_\_\_\_\_  
Job Title \_\_\_\_\_  
Dates employed: From (mm/yy) \_\_\_/\_\_\_ to (mm/yy) \_\_\_/\_\_\_  
Reason for leaving: \_\_\_\_\_

Employer \_\_\_\_\_ Contact Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone (    )    - \_\_\_\_\_  
Job Title \_\_\_\_\_  
Dates employed: From (mm/yy) \_\_\_/\_\_\_ to (mm/yy) \_\_\_/\_\_\_  
Reason for leaving: \_\_\_\_\_

Employer \_\_\_\_\_ Contact Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone (    )    - \_\_\_\_\_  
Job Title \_\_\_\_\_  
Dates employed: From (mm/yy) \_\_\_/\_\_\_ to (mm/yy) \_\_\_/\_\_\_  
Reason for leaving: \_\_\_\_\_

Employer \_\_\_\_\_ Contact Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone (    )    - \_\_\_\_\_  
Job Title \_\_\_\_\_  
Dates employed: From (mm/yy) \_\_\_/\_\_\_ to (mm/yy) \_\_\_/\_\_\_  
Reason for leaving: \_\_\_\_\_

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false or misleading information, omissions or misrepresentations are discovered, my application may be rejected, and if I am employed, my employment may be terminated at any time.

If hired, I agree to conform to the company's rules and regulations, and I understand that these rules and/or the employee handbook do not form a contract of employment either expressed or implied, and I agree that my employment and compensation can be terminated, with or without cause and with or without notice at any time, at either my or the company's option.

I also understand and agree that the terms and conditions of my employment may be changed, with or without cause and with or without notice, at any time by the company. I understand that no company representative, other than its president, and then only when in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make agreement contrary to the forgoing.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume' or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering, and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

**Applicant's Signature** \_\_\_\_\_ **Date** \_\_\_/\_\_\_/\_\_\_