



Employment Application

Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_
Last First M.I.

Address: \_\_\_\_\_
Street Address Apartment/Unit #
City State ZIP Code

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Date Available: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Desired Wage: \_\_\_\_\_

Position Applied for: \_\_\_\_\_

Are you a citizen of the United States? YES NO
Have you ever been convicted of a felony? yes NO

If yes Explain: \_\_\_\_\_

Emergency Contact NAME: \_\_\_\_\_ Phone #: \_\_\_\_\_

Are you currently Employed? \_\_\_\_\_ Where / Job Responsibility: \_\_\_\_\_

Can we call your Supervisor for a reference? \_\_\_\_\_ Name / #: \_\_\_\_\_

Availability to Work-Check Any Shifts You are Available

MORNING (7:00-3:00) - MON [ ] TUE [ ] WED [ ] THUR [ ] FRI [ ] SAT [ ] SUN [ ]

DAY (9:00-5:00) - MON  TUE  WED  THUR  FRI  SAT  SUN

NITE (3:00-11:00) - MON  TUE  WED  THUR  FRI  SAT  SUN

**I am very flexible**

**Previous Employment**

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

YES NO

May we contact your previous supervisor for a reference?

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

YES NO

May we contact your previous supervisor for a reference?

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_

Responsibilities: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your previous supervisor for a reference? YES NO

**If hired will you agree to:**

1. **A strict, zero tolerance cell phone usage while “on the clock”**
2. **A strict, zero tolerance smoking and or any other tobacco product policy while “on the clock”**

YES  NO

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

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_