

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, disability, veteran status or any other legally protected status.

Applicant Information

First Name: Last:

Street Address: Email:

Social Security Number: (Not required if application submitted online):

City/State/Zip: Phone:

Position(s) applied for: Date:

Why are you seeking a new job at this time?

If hired, do you have a reliable means of transportation to get to work? Y/N:

If no, please explain:

List any special skills or training:

Employment Information

Are you seeking full time, part time or temporary employment?

Are you willing to work the following? (check all that apply) overtime? Weekends? Holidays?

Are you currently employed? Y/N: If hired, when would you be able to start? Date:

Have you ever been discharged or asked to resign from any position? Y/N:

If yes, please describe:

Education (select highest level achieved)

Secondary: 9 10 11 12 G.E.D College: 1 2 3 4 5 6 7 8

Name of School: Name of School: Major:

Location of School: Location of School:

Work History (please begin with most recent)

- 1. Company: Phone: Address City/State/Zip Dates of Employment: From To Wage: Beginning Ending Job Title: Supervisor's Name & Title: Describe duties briefly: Specific reason for leaving:

2. **Company:** \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
 Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_ Wage: Beginning \_\_\_\_\_ Ending \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Supervisor's Name & Title: \_\_\_\_\_  
 Describe duties briefly: \_\_\_\_\_  
 Specific reason for leaving: \_\_\_\_\_

3. **Company:** \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
 Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_ Wage: Beginning \_\_\_\_\_ Ending \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Supervisor's Name & Title: \_\_\_\_\_  
 Describe duties briefly: \_\_\_\_\_  
 Specific reason for leaving: \_\_\_\_\_

**May we contact the employers listed above? Y/N:** \_\_\_\_\_  
 If not, list the employers you do not wish us to contact and why: \_\_\_\_\_

**AVAILABILITY:**

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY

**Authorizations & At-Will Employment Agreement**

I certify that I have personally completed this application. I declare that the information provided in this employment application is true and complete and I understand that any false information or significant omissions may disqualify me from further consideration for employment and may be justification for my dismissal from employment if discovered at a later date.

I authorize this company to request a copy of my motor vehicle driving record, criminal records and any other investigative report deemed necessary through various third party sources.

A condition of employment or continued employment and understand that a refusal to submit to such testing during the course of my employment, if hired, may result in disciplinary action, up to and including termination.

**AT-WILL EMPLOYMENT AGREEMENT**

I understand and agree that nothing contained in this application, or conveyed during any interview is intended to create an employment contract between the company and me. In addition, I understand and agree that if you employ me, in consideration of my employment, my employment and compensation will be at-will, for no definite period of time and may be terminated at any time.

Name (please print): \_\_\_\_\_ Date: \_\_\_\_\_

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