



## APPLICATION FOR EMPLOYMENT

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

(PLEASE PRINT)

Position(s) Applied For	Date of Application

Last Name	First Name	Middle Initial	
Address	City	State	Zip
Telephone Number(s)	Email Address		

Best time to contact you is:.....:..... am/pm

Have you ever been employed with us before?.....  Yes     No

If yes, give date(s) \_\_\_\_\_

Are you currently employed?.....  Yes     No

May we contact your present employer? .....  Yes     No

Are you available to work:     Full – Time

Part – Time

Can you travel if a job requires it?.....  Yes     No

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

## EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	<u>Dates Employed</u>		Job Title
	From	To	
_____	_____	_____	_____
_____	_____	_____	_____
Address			
_____	_____	_____	_____
Telephone Number	Hourly Rate/Salary	Supervisor	
_____	_____	_____	
Reason for Leaving			
_____			
<u>Work Performed</u>			
_____			
_____			
_____			

Employer	<u>Dates Employed</u>		Job Title
	From	To	
_____	_____	_____	_____
_____	_____	_____	_____
Address			
_____	_____	_____	_____
Telephone Number	Hourly Rate/Salary	Supervisor	
_____	_____	_____	
Reason for Leaving			
_____			
<u>Work Performed</u>			
_____			
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Employer	<u>Dates Employed</u>	Job Title
	From      To	
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Reason for Leaving		
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<u>Work Performed</u>		
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## **EDUCATION**

	<b>Name and Address of School</b>	<b>Course of Study</b>	<b>Year Graduated</b>	<b>Diploma Degree</b>
<b>Elementary School</b>				
<b>High School</b>				
<b>Undergraduate College</b>				
<b>Graduate Professional</b>				
<b>Other (Specify)</b>				

Describe any specialized training or skill, internship, or job related experience.

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## REFERENCES

1.	_____ ( ) _____
	(Name) Phone #
	_____
	(Address)
2.	_____ ( ) _____
	(Name) Phone #
	_____
	(Address)
3.	_____ ( ) _____
	(Name) Phone #
	_____
	(Address)

## APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

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 90 days. Any applicant wishing to be considered active 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