



## EMPLOYMENT APPLICATION

*Please print*

Date:	Position applied for:
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Last name:	First name:	Middle:
Phone:	Message phone:	Email:
Address:	City/State:	Zip Code:

Questions:	Yes	No
Do you have a driver's license?	<input type="checkbox"/>	<input type="checkbox"/>
Are you age 18 or older:	<input type="checkbox"/>	<input type="checkbox"/>
Have you worked here before?	<input type="checkbox"/>	<input type="checkbox"/>
Are you authorized to work in the United States?	<input type="checkbox"/>	<input type="checkbox"/>
Are you able to meet attendance requirements?	<input type="checkbox"/>	<input type="checkbox"/>

**Note:**

*A background check may be required. Results are evaluated and considered on a case-by-case basis.*

<b>Date available for work:</b>	<b>Type of employment desired:</b> <i>(Circle preference)</i> <i>Full time      Part time      Other</i>
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**EMPLOYMENT HISTORY-** *Please provide the following information for your past four employers, starting with the most recent.*

Employer:	Address:	Phone/Email:
Position:	Supervisor:	Wage:
Start date:	End date:	Reason for leaving:
Job duties and responsibilities:		

Employer:		Address:	Phone/Email:
Position:		Supervisor:	Wage:
Start date:	End date:	Reason for leaving:	
Job duties and responsibilities:			

Employer:		Address:	Phone/Email:
Position:		Supervisor:	Wage:
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Employer:		Address:	Phone/Email:
Position:		Supervisor:	Wage:
Start date:	End date:	Reason for leaving:	
Job duties and responsibilities:			

<p><u>Please list any other skills, qualifications, certificates, or licenses that may qualify you to perform the duties of this position.</u></p>
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**EDUCATION AND TECHNICAL TRAINING**

Name of Institution/ Location	Years attended	Did you graduate?	Course of study
<i>High School:</i>			

**REFERENCES**

Name	Relationship	Phone/Email	Number of years known

**Read and sign below:**

I certify the information contained in this application is true, correct, and complete. I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or sufficient cause for dismissal. I give the employer the right to contact and obtain information from all references, employers, and educational institutions and to verify the accuracy of the information provided. I hereby release from liability the employer and its representatives for seeking, gathering, and using such information and all other person, corporations, or organizations for furnishing such information.

The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state, or federal law.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA. I represent and warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of applicant:	Date:
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