

Employment Application



APPLICANT DATA

Date: / /

Full name: _____

Address: _____
Last *First* *Middle*

City: _____ State: _____ Zip Code: _____

Phone: () Other Phone: () E-Mail Address: _____

Position applied for: _____

Date Available to Start: _____ Social Security Number: _____ Salary Requirement: _____

If you are under 18 and we require a work permit, can you furnish one? Yes No

If not, please explain _____

Have you ever worked for this company? Yes No If yes, when? _____

Are you a citizen of the United States? Yes No If not, are you legally allowed to work in the United States? Yes No

Type of employment desired: Full-time Part time Temporary Seasonal

Have you ever pled "guilty," "no contest," or been convicted of a crime? Yes No

If yes, give dates and details: _____

Answering "yes" to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitating, and position applied for will be considered.

Driver's license number if applicable to position: _____ State: _____

Who referred you to us? _____

EDUCATION

High school: _____ Address: _____

of years Completed: _____ Did you graduate? _____

GPA: _____ Class Rank: _____

High school: _____ Address: _____

of years Completed: _____ Did you graduate? _____

GPA: _____ Class Rank: _____

High school: _____ Address: _____

of years Completed: _____ Did you graduate? _____

GPA: _____ Class Rank: _____

REFERENCES

Please furnish the names, addresses and telephone numbers of two people to whom you are not related and by whom you have not been employed:

1) Name: _____ Phone () _____

Address: _____ City: _____ State: _____ Zip Code: _____

2) Name: _____ Phone () _____

Address: _____ City: _____ State: _____ Zip Code: _____

SUMMARIZE YOUR SPECIAL SKILLS OR QUALIFICATIONS

SPECIAL QUESTIONS

Do not answer ANY of the questions in this framed area unless the employer has CHECKED a BOK PRECEDING a question. Thereby indicating that information is required for a Bona Fide Occupational Qualification, or dictated by National Security Laws, or is needed for other legally permissible reasons.

Height _____ Feet _____ Inches Citizen of U.S. _____ Yes _____ No _____

Weight _____ Lbs. Date of Birth* _____

What Foreign Languages do you speak fluently? _____ Read _____ Write _____

** The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.*

FORMER EMPLOYER

List below last four employers, starting with last one first.

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

PHYSICAL RECORD

Do you have any physical limitations that preclude you from performing any work for which you are being considered? Yes No

Please Describe: _____

In Case of Emergency Notify _____

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that If employed, falsified statements on this application shall be grounds for dismissal

I authorize investigation of all statements contained herein and the references listed above to give you any and off information concerning my previous employment and any pertinent information they may have. Personal or otherwise, and refuse all parties from all liability for any damage that may result from furnishing same to you.

I understand and agree that. If hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, Be terminated at any time without any prior notice."

Date: _____ Signature: _____

-----DO NO WRITE BELOW THIS LINE-----

Interviewed by: _____ Date: _____

Hired: Yes No Position _____ Dept.: _____

Salary/Wage _____ Date reporting to work: _____

Approved 1 _____ 2 _____ 3 _____
EMPLOYMENT DEPT. HEAD GENERAL MANAGER