



# Employment Application

Programs, services, and employment are equally available to everyone. Please inform the Human Resources Department if you require reasonable accommodation for the application or interview.

Position applied for:		Today's Date:	
How were you referred to us?			

## Applicant Data:

Full name (Last, First, Middle):					
Address:					
City:		State:		Zip:	
Primary Phone:			Secondary Phone:		
Email:					
Date available to start:			Salary Requirement:		
Are you 18 years or older?		YES:		NO:	
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:		1 <sup>st</sup> Shift:		2 <sup>nd</sup> Shift:	
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Have you ever been convicted of a crime greater than a misdemeanor?	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, rehabilitation and position applied for will be considered.

What is the last grade of school completed?	
What is the best method and time you can be reached	

**Summarize Your Special Skills or Qualifications:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



**Previous Employment (begin with most recent position):**

Dates of Employment:	From:		To:	
Position(s) Held:				
Company Name:				
Address:			Phone:	
Supervisor:			Title:	
Responsibilities:				
Starting Salary:		Starting Title:		
Ending Salary:		Ending Title:		
Reason for leaving:				
May we contact this employer as a reference?				

Dates of Employment:	From:		To:	
Position(s) Held:				
Company Name:				
Address:			Phone:	
Supervisor:			Title:	
Responsibilities:				
Starting Salary:		Starting Title:		
Ending Salary:		Ending Title:		
Reason for leaving:				
May we contact this employer as a reference?				

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial, and other related matters as may be necessary for an employment decision.

I hereby release employers, schools, or individuals from all liability when responding to inquiries in connection with my application.

In the event I am unemployed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_