



Application for Employment

Personal Information	Last Name	MI	First Name	Date of Application
	Present Address			
	Number		Street	Apt
	City		State	Zip Code
	Home Telephone ()		Mobile Telephone (if different) ()	

General Data	Position Applying For	Full Time	or	Part Time			
		[]		[]			
	Shifts Available (Specify Times)						
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
	How Did you Learn of This Job Opening:						
	<input type="checkbox"/> Advertisement <input type="checkbox"/> Walk-In <input type="checkbox"/> Relative/Friend <input type="checkbox"/> Referral _____ <input type="checkbox"/> Agency <input type="checkbox"/> Other						
	If under 18 years of age, can you supply a work permit after employment? (proof of age and work permit may be required prior to hiring) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA						
Are you able to perform the essentials of the position in which you are applying with/without reasonable accommodations? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Are you Legally Eligible for employment in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No							
If employed within the position you applied, will you be in a supervisory or subordinate position to any relative? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Have you ever been convicted of a crime, misdemeanor or felony? (if yes, please describe in detail below) <input type="checkbox"/> Yes <input type="checkbox"/> No							

Education		High School	College	Trade/Professional/Other
	Name			
	Address			
	Years Completed			
	Course or Major			
	Degree Completed			

Employment	Most Recent Employment History first	
	Employer: _____	Dates Employed: _____ to _____
	Work Phone: () _____	Address: _____
	City: _____	State: _____ Zip Code: _____

Employment	Pay Rate: \$ _____ Hourly Position: _____
	Duties Performed: _____
	Reason for Leaving: _____
	Supervisor's Name and Title: _____ May we contact? [<input type="checkbox"/>] Yes [<input type="checkbox"/>] No
	Employer: _____ Dates Employed: _____ to _____
	Work Phone: () _____ Address: _____
	City: _____ State: _____ Zip Code: _____
	Pay Rate: \$ _____ Hourly Position: _____
	Duties Performed: _____
	Reason for Leaving: _____
Supervisor's Name and Title: _____ May we contact? [<input type="checkbox"/>] Yes [<input type="checkbox"/>] No	

List at least two personal references below that we may contact:

References	Name	Relationship to Reference	Phone Number

I certify that the facts set forth in this application for employment and/or resume are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for refusal to hire and/or immediate dismissal at any time during employment. This company is hereby authorized to make any investigations of my prior educational and employment history, unless otherwise noted. I release this company, any persons and organizations from all claims of liabilities of any nature arising from such investigations for this application for employment. I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment will continue on that basis.

Signature _____

Date _____