

All applicants are considered without regard to race, color, ethnic or national origin, religion, gender, age, marital status or sexual preference, veteran status, physical or mental handicap, or any legally protected status.

POSITION(S) YOU ARE APPLYING FOR:

Last Name	First	Initial
Address		
City	State	Zip
Telephone	Message	Cell./Pager
Social Security #		

Person to notify in case of emergency:

EDUCATION

Type of School	Name/Location	Years Completed	Degree Obtained
High School			
Vocational/Technical			
College/University			
Post Graduate			
Other Education or Special Training			

Other Languages you speak, read, and write fluently:

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Are you currently employed? May we communicate with your present employer? Yes No

If you are not a citizen do you have the right to work? Yes No

Proof of citizenship or immigration status will be required upon employment.

If hired, on what date will you be available to start work? _____

Do you have any prior or pending legal claims? Yes No

Explain:

HOW DID YOU LEARN ABOUT US?

- Advertisement
- Telephone Directory
- Other: _____
- Walk-In
- Referred By:
- Employment Agency

EMPLOYMENT EXPERIENCE, MOST RECENT FIRST

EMPLOYER Dates Employed: From _____ To _____

Address: _____ Job Title: _____
Work Performed: _____

Telephone _____ Salary: Starting _____ Final _____

Supervisors Name _____ Reason for Leaving _____

EMPLOYER Dates Employed: From _____ To _____

Address _____ Job Title: _____
Work Performed: _____

Telephone _____ Salary: Starting _____ Final _____

Supervisors Name _____ Reason for Leaving _____

EMPLOYER Dates Employed: From _____ To _____

Address _____ Job Title: _____
Work Performed: _____

Telephone _____ Salary: Starting _____ Final _____

Supervisors Name _____ Reason for Leaving _____

EMPLOYER Dates Employed: From _____ To _____

Address _____ Job Title: _____
Work Performed: _____

Telephone _____ Salary: Starting _____ Final _____

Supervisors Name _____ Reason for Leaving _____

List additional qualifications, professional and civic activities that may be helpful to us in considering your application:

References other than relatives or former employers:

Name	Address	Telephone
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. 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 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby acknowledge that any employment relationship with this company is an "AT WILL" nature, which means that the Employee may resign at any time and the Employer may discharge a 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 changes is specifically acknowledged in writing by an authorized Executive of the Company.

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

OFFICE USE ONLY

Interviewer

Interview Date

TEST SCORE: General _____ Medication _____

REMARKS: Salary \$ _____ \$ _____ \$ _____

