Application for Employment



It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classifications.

Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions on this application. We recommend you attach a résumé and cover letter, but all questions below <u>must</u> be answered.

"Employer"	Employer"			Position applying for								
PERSONAL DATA												
Name (last, first, middle)												
Street Address and/or Mailing Address		Cit	ity			State		Zip				
Home Number		Cellular Number	<u> </u>			Other Number	r					
Date you can start work		Salary Desired				Do you have a High School Diploma or GED? Yes ☐ No ☐)?			
POSITION INFORMATION	OSITION INFORMATION Check all that you are willing to work											
Hours: Full Time Status: Regular Part Time Temporary												
Are you authorized to work in the U	S. on an unrestricted	l basis?					Yes		No			
Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment.) Yes No If yes, explain:												
Have you been told the essential functions of the job or have you been viewed a copy of the job description listing the essential functions of the job? Yes No No												
Can you perform these essential functions of the job with or without reasonable accommodation? Yes \Boxed No \Boxed												
QUALIFICATIONS Please list any education or training you feel relates to the position applied for that would help you perform the work, such as schools, colleges, degrees, vocational or technical programs, and military training.												
	School Na	ame	Degr	ree	ee Address/City/State							
School												
School												
Other												
SPECIAL SKILLS List any s	pecial skills or exper	ience that you feel wou	ıld help you	in the pos	sition that	you are apply	ing for (leadersh	nip, orş	ganizatior	ns/teams, etc.).		
REFERENCES Please list three professional references not related to you, with full name, address, phone number, and relationship. If you don't have three professional references, then list personal, unrelated references.												
Name	Name			Address/City/State			Phone	_	Re	lationship		
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WORK HISTORY Start with your present or most recent employee	oyment and work b	ack. Use separate sheet if necessary.	(INCLUDE PAID AND UNPAID POSITIONS)			
Job Title #1	Start Date (mo/	day/yr)	End Date (mo/day/yr)			
Company Name	Supervisor's Na	ame	Phone Number			
City	State		Zip			
Duties:						
Reason for Leaving		Starting Salary	Ending Salary			
May we contact your present employer?	Yes	No				
Job Title #2	Start Date (mo/	day/yr)	End Date (mo/day/yr)			
Company Name	Supervisor's Na	ame	Phone Number			
City	State		Zip			
Duties:						
Reason for Leaving		Starting Salary	Ending Salary			
Job Title #3	Start Date (mo/	day/yr)	End Date (mo/day/yr)			
Company Name	Supervisor's Na	ame	Phone Number			
City	State		Zip			
Duties:						
Reason for Leaving		Starting Salary	Ending Salary			
Job Title #4	Start Date (mo/	day/yr)	End Date (mo/day/yr)			
Company Name	Supervisor's Na	ame	Phone Number			
City	State		Zip			
Duties:						
Reason for Leaving		Starting Salary	Ending Salary			
I certify that the facts set forth in this Application for Employed, false statements, omissions or misrepresentations may et forth in this application and release the Employer from any lia I acknowledge and understand that the company is an "mployee) may resign at any time, just as the employer may term r without notice to the other party.	result in my disrability. The emptate will" employe	missal. I authorize the Employer loyer may contact any listed refe er. Therefore, any employee (reg	to make an investigation of any of the facts rences on this application. ular, temporary, or other type of category			
pplicant Signature		Date				