



## APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

### PERSONAL INFORMATION

NAME

LAST \_\_\_\_\_ FIRST \_\_\_\_\_ MIDDLE \_\_\_\_\_

ADDRESS

STREET \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ ARE YOU 18 YEARS OR OLDER? YES \_\_\_\_\_ NO \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR WITHIN THE LAST 5 YEARS?

YES \_\_\_\_\_ NO \_\_\_\_\_

DESCRIBE \_\_\_\_\_  
\_\_\_\_\_

### EMPLOYMENT DESIRED

POSITION \_\_\_\_\_ DATE TO START \_\_\_\_\_ SALARY DESIRED \_\_\_\_\_

ARE YOU EMPLOYED NOW? \_\_\_\_\_

IF SO, MAY WE CONTACT YOUR PRESENT EMPLOYER? \_\_\_\_\_

### EDUCATION

HIGH SCHOOL

NAME/LOCATION OF SCHOOL \_\_\_\_\_ NUMBER OF YEARS ATTENDED \_\_\_\_\_ DID YOU GRADUATE \_\_\_\_\_

COLLEGE

NAME/LOCATION OF SCHOOL \_\_\_\_\_ NUMBER OF YEARS ATTENDED \_\_\_\_\_ DID YOU GRADUATE \_\_\_\_\_

TRADE OR BUSINESS SCHOOL

NAME/LOCATION OF SCHOOL \_\_\_\_\_ NUMBER OF YEARS ATTENDED \_\_\_\_\_ DID YOU GRADUATE \_\_\_\_\_

**FORMER EMPLOYERS** LIST BELOW LAST THREE EMPLOYERS, STARTING WITH LAST ONE FIRST

DATE(MONTH AND YEAR) \_\_\_\_\_

NAME/ADDRESS OF EMPLOYER \_\_\_\_\_

SALARY \_\_\_\_\_ POSITION \_\_\_\_\_

FROM \_\_\_\_\_ TO \_\_\_\_\_

DATE(MONTH AND YEAR) \_\_\_\_\_

NAME/ADDRESS OF EMPLOYER \_\_\_\_\_

SALARY \_\_\_\_\_ POSITION \_\_\_\_\_

FROM \_\_\_\_\_ TO \_\_\_\_\_

DATE(MONTH AND YEAR) \_\_\_\_\_

NAME/ADDRESS OF EMPLOYER \_\_\_\_\_

SALARY \_\_\_\_\_ POSITION \_\_\_\_\_

FROM \_\_\_\_\_ TO \_\_\_\_\_

**REFERENCES** GIVE THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE WORKED WITH IN THE PAST

NAME \_\_\_\_\_ BUSINESS \_\_\_\_\_

PHONE \_\_\_\_\_ YEARS ACQUAINTED \_\_\_\_\_

NAME \_\_\_\_\_ BUSINESS \_\_\_\_\_

PHONE \_\_\_\_\_ YEARS ACQUAINTED \_\_\_\_\_

NAME \_\_\_\_\_ BUSINESS \_\_\_\_\_

PHONE \_\_\_\_\_ YEARS ACQUAINTED \_\_\_\_\_

**PHYSICAL RECORD**

DO YOU HAVE ANY PHYSICAL LIMITATIONS THAT PRECLUDE YOU FROM PERFORMING ANY WORK FOR WHICH YOU ARE BEING CONSIDERED? YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, WHAT CAN WE DO TO ACCOMMODATE YOUR LIMITATION?

\_\_\_\_\_

IN CASE OF EMERGENCY NOTIFY:

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

"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 all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release 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 prior notice."

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

\_\_\_\_\_

HIRED: YES \_\_\_\_\_ NO \_\_\_\_\_ DATE OF HIRE \_\_\_\_\_

SALARY/WAGE \_\_\_\_\_ POSITION \_\_\_\_\_ DEPT \_\_\_\_\_

INTERVIEWED BY \_\_\_\_\_ DIRECTOR APPROVAL \_\_\_\_\_

\_\_\_\_\_