



## Employment Application Form

Today's Date: \_\_\_\_\_

### Applicant Information

Name _____		
Last	First	Middle
Permanent Address _____		
Street		
_____		
City	State	Zip Code
Phone: _____ Email Address: _____		

Position applying for \_\_\_\_\_ Desired salary \$ \_\_\_\_\_

How were you referred to this company?		
Agency <input type="checkbox"/>	Walk-in <input type="checkbox"/>	Friend/Relative <input type="checkbox"/> _____
Website <input type="checkbox"/>	School <input type="checkbox"/>	Other <input type="checkbox"/> _____
Employment Desired:	Full-Time <input type="checkbox"/>	Part-Time <input type="checkbox"/> Temporary/Seasonal <input type="checkbox"/>
Are you available to work weekends?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you available to work overtime?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Are you 18 years of age or older?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you able to provide proof of eligibility to work in the US?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever applied to our Company before?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, when? _____
Have you worked for our Company in the past?	Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, when? _____
Driving jobs only: Do you have a valid driver's license?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

<b>Education</b>				
<b>School</b>	<b>Name and Location</b>	<b>Number of Years Attended</b>	<b>Major</b>	<b>Diploma/Degree</b>
<b>High School or GED</b>				
<b>College</b>				
<b>Graduate</b>				
<b>Vocational/ Technical</b>				

<b>Training Courses – List any relevant academic honors, awards, scholarships, professional organizations, volunteer activities, certificates, publication, licenses or any other information consider significant and relevant to employment:</b>			
<b>Course/Seminar</b>	<b>Organization</b>	<b>Content</b>	<b>Date(s) Attended</b>

<b>Employment History – List your work experience for the past three years beginning with your recent job held.</b>		
1. <b>Name of Company</b> _____ <b>From</b> _____ <b>To</b> _____		
<b>Address:</b> _____		
<b>City</b>	<b>State</b>	<b>Zip Code</b>
<b>Employer's Phone Number:</b> _____ <b>Position Title:</b> _____		
<b>Supervisor's Name</b> _____ <b>Ending Salary:</b> _____		
<b>Describe Duties/Responsibilities:</b> _____		
<b>Reason for leaving:</b> _____ <b>May we contact this employer? Yes</b> <input type="checkbox"/> <b>No</b> <input type="checkbox"/>		

**2. Name of Company** \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
 Address: \_\_\_\_\_

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City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Employer's Phone Number: \_\_\_\_\_ Position Title: \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Describe Duties/Responsibilities: \_\_\_\_\_

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Reason for leaving: \_\_\_\_\_ May we contact this employer? Yes  No

**3. Name of Company** \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
 Address: \_\_\_\_\_

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City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Employer's Phone Number: \_\_\_\_\_ Position Title: \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Describe Duties/Responsibilities: \_\_\_\_\_

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Reason for leaving: \_\_\_\_\_ May we contact this employer? Yes  No

Business References	
Name and Business	Phone Number and Relationship

**Military Service**

Branch of Service \_\_\_\_\_

Date Entered \_\_\_\_\_ Date Discharged \_\_\_\_\_

Nature of duties, special skills, training, etc. \_\_\_\_\_

**Please Read Carefully Before Signing This Form**

All information contained in this application is true to the best of my knowledge and belief. I understand that misrepresentation or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am selected/hired.

I authorize this company to investigate my responses on this application and contact any or all of my former employers or any individuals familiar with me or my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information, whether favorable or unfavorable, about me or my employment. I voluntarily and knowingly fully release and hold harmless any person or organization that provides information pertaining to my employment or me.

Regardless of whether or not I become selected/hired by this company, I recognize that this application is not and should not be considered a contract of employment for any definite period of time. If employed, I understand that I have been hired "At-Will" of the employer and my employment may be terminated at any time, with or without cause and with or without notice.

Original Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

Our Company is an Equal Employment Opportunity employer. We adhere to a policy of making employment decisions without regards to race, color, religion, sex, sexual orientation, gender identity, age, disability or any other protected categories. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.