

## **APPLICATION FOR EMPLOYMENT**

DATE:	
Qualified applicants receive equal consideration. No question is asked for the pur national origin, religion, age, sex, disability, or any other factor prohibited by law of	rpose of excluding any applicant due to race, color, or regulation. AN EQUAL OPPORTUNITY EMPLOYER.
PERSONAL INFORM	MATION
NAME (Last, First, Middle)	TELEPHONE NUMBER
ADDRESS (Street, City, State, Zip Code)	DATE OF BIRTH
Person to notify in case of emergency (Name, Address, Phone #):	
Are you at least 18 years old? Yes ☐ No ☐ Referred by:	
List any other names you have worked under:	
email address	
EMPLOYMENT DE	SIRED
Position desired:	Date you can start:
How long do you plan to work here?	
Please explain:	
Are you available to work: Days □ Nights □ Weekends □ Holidays □	
Are you seeking: Full-time employment ☐ Part-time ☐	
Can you present documents verifying that you have the legal right to be emp	loyed in the United States? Yes $\square$ No $\square$
Which documents will you use:	
EDUCATION	<u>u</u>
Do you have a high school diploma or equivalent? Yes ☐ No ☐ Currently	y enrolled ☐ (List School Below -
Are you a college graduate? Yes ☐ No ☐ Currently enrolled ☐	attending or graduated from)
Name and location:	
Major:	
List the name and location of any Trade, Business, or Correspondence schools	you have attended:

## EMPLOYMENT HISTORY

## Start with present or last job and work back

	EMPLOYER		ADDRESS (City, State	ADDRESS (City, State)		JOB TITLE	
1	DATE STARTED	DATE ENDED	SALARY START	SALARY END	SUPERVISOR		
	WORK PERFORMED		REASON FOR LEAV	REASON FOR LEAVING			
	EMPLOYER		ADDRESS (City, State	ADDRESS (City, State)		JOB TITLE	
	DATE STARTED	DATE ENDED	SALARY START	SALARY END	SUPERVISOR		
2	WORK PERFORMED		REASON FOR LEAV	REASON FOR LEAVING			
	EMPLOYER		ADDRESS (City, State)		TELEPHONE (Area Code)	JOB TITLE	
	DATE STARTED	DATE ENDED	SALARY START	SALARY END	SUPERVISOR		
3	WORK PERFORM	ORK PERFORMED		REASON FOR LEAV	REASON FOR LEAVING		
_	EMPLOYER		ADDRESS (City, State	2)	TELEPHONE (Area Code)	JOB TITLE	
	DATE STARTED	DATE ENDED	SALARY START	SALARY END	SUPERVISOR		
	WORK PERFORMED			REASON FOR LEAV	DEASON FOR LEAVING		
4		1200					
Ha Re	ve you ever l ason?	been fired from	above employers w a job? Yes □ No ame, Address, Phone	☐ Almost ☐	sh us to contact		
V 0 /L	siah haat das		an ality O				
		cribes your perso Dsually outgo	onality? oing D Sometimes	outgoing  Shy			
Wh Exc	nich best desc cellent 🗌 G	cribes your sales ood 🗆 Averag	ability? ge □ No experiend	ce 🗆			
EΧ	<b>CLUDING</b> orga	anizations in whi	ich names or charac	cter indicates race,	religion, age, sex, disabili	ty, or national origin, list areas of	
spe	ecial interest.	(i.e. civic, athle	tic, fun, etc.):				
			40		BT B. BTT.		

## **AGREEMENT**

APPLICANT AGREEMENT (Read carefully before signing.) All information provided by me is true and correct to the best of my knowledge. I understand omissions or misrepresentations may result in rejection of my application or, if employed, may result in subsequent dismissal. I hereby authorize any former employer, person, school, firm or corporation listed hereon, including this company, to answer any and all questions related to employment and agree to release from liability and hold all persons harmless for giving any and all truthful information within their knowledge or records. I understand this is a preliminary application and not a contract to employ me. Furthermore, in the event Lam employed, my employment shall be completely voluntary and may be terminated at will at any time by either myself or the company. I understand that no one other than the company president has authority to enter into any employment agreement to the contrary. I agree to take a job related physical examination or a drug/alcohol test when requested as a condition of employment. I agree to comply with all rules of the company as a condition of employment. In the event the company advances me money or other things of value, I agree to repay the company and also that any amount still owing may be deducted from my final paycheck.

APPLICANT'S SIGNATURE DATE