



APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Position Applied For: _____

Date of Application: _____

How Did You Learn About Us?

Advertisement Friend Walk-In
 Employment Agency Relative Other _____

Last Name

First Name

Middle Name

Address Number

Street

City

State

Zip Code

Telephone Number(s) _____ Social Security Number: _____

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

Have you ever filed an application with us before? Yes No

If yes, give date _____

Have you ever been employed with us before? Yes No

If yes, give date _____

Are you currently employed? Yes No

May we contact your current employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No

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

On what date will you be available for work? _____

Are you available to work: Full Time Part Time Shift Work Temporary

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Have you been convicted of a felony within the last 7 years? Yes No

Conviction will not necessarily disqualify an applicant from employment.

If Yes, please explain: _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

	Name & Address of School	Course of Study	Years Completed	Diploma/Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Indicate any foreign languages you can speak, read and/or write:

	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

Describe any specialized training, apprenticeship, skills and extra-curricular activities:

Describe any job-related training received in the United States Military:

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer 1.	Dates Employed From: _____ To: _____	Work Performed
Address:		
Phone No.:	Hourly Rate/Salary Starting: _____ Final: _____	
Job Title: _____ Supervisor: _____		
Reason for Leaving:		
Employer 2.	Dates Employed From: _____ To: _____	Work Performed
Address:		
Phone No.:	Hourly Rate/Salary Starting: _____ Final: _____	
Job Title: _____ Supervisor: _____		
Reason for Leaving:		
Employer 3.	Dates Employed From: _____ To: _____	Work Performed
Address:		
Phone No.:	Hourly Rate/Salary Starting: _____ Final: _____	
Job Title: _____ Supervisor: _____		
Reason for Leaving:		
Employer 4.	Dates Employed From: _____ To: _____	Work Performed
Address:		
Phone No.:	Hourly Rate/Salary Starting: _____ Final: _____	
Job Title: _____ Supervisor: _____		
Reason for Leaving:		

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry disability or other protected status:

FOR PERSONNEL DEPARTMENT USE ONLY

Position(s) Applied For Is Open: Yes No

Position(s) Considered For: _____

Date: _____

NOTES: _____
