

# Application for Employment

## We are an Equal Opportunity Employer

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or any other legally protected status.

(Please Type or Print)

Position(s) Applied For:			Date of Application:			
Last Name:		First Name:		Middle Name/Initial:		
Street Address:		City:		State:		
				Zip Code:		
Telephone Number(s): H: C:				Social Security Number: Can provide later but you must pass background check prior to being hired. XXX - XX - XXXX		
Have you ever been employed with us before? If yes, when?					Yes	No
Are you currently employed?					Yes	No
May we contact your present employer? Preferred method of contact?					Yes	No
Date would you be available for work?					Yes	No
Are you available to work any shift and overtime if necessary?					Yes	No
Are you currently on "lay-off" status and subject to recall?					Yes	No

Education:	High School	Trade School	Undergraduate/ College/University	Graduate/ Professional
School Name & Location				
Years Completed	9 10 11 12		1 2 3 4	1 2 3 4
Diploma/Degree				
Course of Study				
Describe any Specialized training, skills, etc.	CDL License = Yes No Class —			

**List Professional, trade, business or civic activities and offices held:**

*You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, handicap or other protected status.*


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<b>REFERENCES:</b> Give name, addresses and telephone number of three references who are not related and are not previous employers

**Employment Experience** Start with your present or last job. Include any job-related military services assignment and volunteer activities. You may exclude organizations which indicate race, religion, gender, national origin, handicap, or other protected status.

Employer	Dates Employed		Worked Performed
	From	To	
Address			
Telephone Number	Hourly Rate/Salary		
	Starting	Final	
Job Title			
Reason For Leaving			
Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number	Hourly Rate/Salary		
	Starting	Final	
Job Title			
Reason For Leaving			
Employer	Dates Employed		Work Performed
	From	To	
Address			
Telephone Number	Hourly Rate/Salary		
	Starting	Final	
Job Title			
Reason For Leaving			

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

<b>Special Skills and Qualifications:</b> Summarize special job-related skills and qualifications acquired from employment and other experience.

This application must be signed by the applicant in order to receive consideration. By signing the application, the applicant attests that all information contained herein and with any other information provided in support of the applicant's candidacy is, to the best of the applicant's knowledge true, factual, and correct. Intentionally providing untrue or incorrect information will warrant immediate dismissal if hired.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date