

APPLICATION FOR EMPLOYMENT

Qualified applicants are considered for all positions without regarding to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a non-job related medical condition or handicap.

PERSONAL INFORMATION

Social Security No. _____ Application Date _____

Name _____ Phone _____
Last First Middle

Address _____ City _____ State _____

Permanent Address _____

Married? Yes No Number of Dependents _____

Drivers License No. _____ State of _____

Are you a citizen of the United States? Yes No

If not, do you possess an Alien Registration Card? Yes No

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

EDUCATIONAL HISTORY

School Level	Name/Location of School	Number of Years	Year Graduated	Subject Studied/Major
Grammar School				
High School				
College				
Trade School				

EMPLOYMENT DESIRED

Position(s) applied for _____

Date you can start _____ Salary desired _____

Are you currently employed? Yes No If, so may be contact your present employer? _____

Do you have any limitations which would hinder your performance in the position applied for? _____

EMPLOYMENT EXPERIENCE

List each job held. Start with your Present or Last job. Include military service assignments and volunteer activities. (Exclude groups which indicated race, color, religion, sex or national origin.)

Employer:		Worked Performed
Address:		
Job:		
Dates: Start	End	
Wages: Start \$	End \$	
Supervisor:		
Reason for Leaving:		
Employer:		Worked Performed
Address:		
Job:		
Dates: Start	End	
Wages: Start \$	End \$	
Supervisor:		
Reason for Leaving:		
Employer:		Worked Performed
Address:		
Job:		
Dates: Start	End	
Wages: Start \$	End \$	
Supervisor:		
Reason for Leaving:		
Employer:		Worked Performed
Address:		
Job:		
Dates: Start	End	
Wages: Start \$	End \$	
Supervisor:		
Reason for Leaving:		

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

Summarize special skills and qualifications acquired from employment or other experiences. _____

REFERENCES

Give below the names of three persons not related to you, whom you have known at least one year.

Name	Address	Phone	Business	Years Acquainted
1.				
2.				
3.				

In case of emergency, notify:

Name	Address	Phone No.
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I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application as may be necessary in arriving at an employment decision. I understand that any misrepresentation, falsification or omission of information may result in my failure to receive an offer, or, if I have been hired, in my dismissal from employment.

In consideration of my employment, I agree to conform to the rules and standards of the company. I understand and agree that my employment is for no definite period, and agree that my employment and compensation can be terminated at will, with or without cause, and with or without notice, at any time, either at my option or at the option of the Company.

I understand that, except by specific written agreement endorsed by the President of the Company, no employee or representative of the Company has any authority to enter into any agreement for employment for any specified period of time, or to make any promises about future conditions of employment including, but not limited to, promotions, pay increases or future benefit levels.

I understand that applicants for positions with the Company will be required to take and SATISFACTORILY PASS A PRE-EMPLOYMENT PHYSICAL EXAMINATION, INCLUDING DRUG SCREEN, provided at Company expense.

I further understand that all offers of employment are conditioned on the provision of satisfactory proof of identity and legal authority to work in the United States.

Sign Here _____ Date _____

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Do Not Write Below This Line

Interviewed By:	Date:
Remarks:	
Neatness:	Character:
Personality:	Ability:
Hired:	Position:
Reporting Date:	Salary/Wages: