

Name

Position Applied For

Date

APPLICATION FOR EMPLOYMENT

An
Equal
Opportunity
Employer

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All statements made by applicants for employment on this application form will be carefully checked for accuracy. We Offer equal employment opportunities to all persons without regard to race, religion, age, sex, national origin, handicap or any other protected class. The use of this form does not mean there are positions open and does not obligate us in any way. This application will remain on active file for a period of 12 months from date of application.

Personal Information

Name (print) _____ Cell Phone: _____
 (last name) (first name) (middle name) Home Phone: _____
 Present Address: _____ Email Address: _____
 No. Street
 City State Zip Date Of Birth: ____/____/____
 previous address: _____ Social Security Number: ____/____/____
 Are you over the age of 18? Yes No If no, employment is subject to verification that you are of minimum legal age.
 What languages can you read, speak and write fluently? _____
 Are you a citizen of the United State? Yes No if not a citizen of the U.S., can you provide Form 1-151 or Form 1-94 as proof that you can legally be employed in the United States? Yes No Do you intend to remain permanently in the U.S.? Yes No

Position applied for _____ How soon can you report to work? _____
 Type of employment Full Time Part Time Temporary Rate of Pay Expected: _____
 What days and hours if part time? Days _____ Hours _____
 From () am () pm To () am () pm

Education

Type Of School	Name & Address of School	Courses Majored In	Last Year Complete	Graduated?
ELEMENTARY			5 6 7 8	
HIGH SCHOOL			1 2 3 4	Y N
COLLEGE			1 2 3 4	Y N

Service In U.S. Armed Forces

Have you served in the U.S. Armed Forces? Yes No If yes, date active duty started _____

Which service? _____ What branch of that service? _____

Starting rank? _____ Ending rank? _____

What were your duties? _____

References

(do not list relatives or former employees)

Name: _____ Address: _____ Phone #: _____

Name: _____ Address: _____ Phone #: _____

Name: _____ Address: _____ Phone #: _____

Job Applicant's Agreement And Certification

I certify that the information given by me in this application is true in all respects, and I agree that if employed and it is found to be false in any way, that I may be subject to dismissal without notice, if and when discovered. I authorize the use of any information in this application to verify my statements, and I authorize the past employers, doctors, all references, and any other person to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damages on account having furnished such information. I further agree, if employed, that I am to work faithfully and diligently, to be careful and avoid accidents, to come to work promptly, and I am not to be absent for any reason without prior notice to my supervisor, and that employment is terminable at the will of either the employee or employer.

I agree to be employed, if the job is offered to me and I agree to the offered terms. A 90 probationary period begins upon employment and I may be dismissed at any time during this period at the discretion of the employer. I agree to submit to a physical examination whenever requested and, if employed, I agree to observe all present and subsequently issued personnel policies and rules. These rules and policies are intended to guide the organization in its relationship with its employees. It is not a contract of employment, and I do not construe it as such. Policies and rules which are issued are not conditions of employment. I understand that the employer may revise policies or procedures, in whole or in part, at any time, with or without notice.

Signature of Applicant

Date