## Application For Employment

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 handicap, or any other legally protected status.
(PLEASE PRINT)

| Position(s) Applied For |  | Date of Application |  |
| :--- | :--- | :--- | :--- |
| How Did You Learn About Us? | $\square$ Friend | $\square$ Walk-In |  |
| $\square$ Advertisement | $\square$ Other |  |  |
| $\square$ Employment Agency | $\square$ Relative | $\square$ Other |  |


| Last Name |  | First Name |  | Middle Name |  |
| :--- | :--- | :--- | :--- | :--- | :--- |
|  |  |  |  |  |  |
| Address | Number | Street | City | State | Zip Code |
|  |  |  |  |  |  |
| Telephone Number (s) |  |  | Social Security Number | Date of Birth |  |
|  |  |  |  |  |  |

If you are under 18 years of age, can you provide the required proof of your eligibility to work?

Have you ever applied with us before?YesNo

Have you ever been employed with us before?

Are you currently employed?
$\square$ YesNo
f Yes, give date $\qquad$

May we contact your present employer?
$\square$ YesNo

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?

Proof of citizenship or immigration status will be required upon employment.
$\square$ Yes No

On what date would you be available for work?

| Are you available to work: $\quad \square$ Part-time | $\square$ Shift Work | $\square$ Temporary |
| :--- | :---: | :---: |
| Are you currently on "lay-off" status and subject to recall? | $\square$ Yes $\square$ No |  |
| Can you travel if a job requires it? | $\square$ Yes $\square$ No |  |

## Education

|  | Elementary School |  |  |  |  | High School |  |  |  | Undergraduate College / University |  |  |  | Graduate/ Professional |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| School Name and Location |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Years Completed | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| Diploma / Degree |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Describe Course of Study |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Describe any specialized training, apprenticeship, skills and extra-curricular activities |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Describe any honors you have received |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| State an additional information you feel may be helpful to us in considering your application |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Indicate any foreign languages you can speak, read and/or write |  |  |  |
| :--- | :--- | :--- | :--- |
|  | FLUENT | GOOD | FAIR |
| SPEAK |  |  |  |
| READ |  |  |  |
| WRITE |  |  |  |

List professional, trade, business, or civic activities and offices held.
You may exclude memberships that would reveal sex, race, religion, national origin, age, ancestry, handicap, or other Protected status:

## References

Give the name, address, and telephone number of three references who are not related to you and are not previous employers.
1.
2.
3.

Have you ever had any job-related training in the United States military?
No Yes

If Yes, please describe $\qquad$

Are you physically or otherwise unable to perform the job duties you are applying for? No

## Employment Experience

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


Please continue on a separate sheet of paper if you need additional space.

## Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.
$\qquad$
$\qquad$
$\qquad$
$\qquad$
$\qquad$

## Applicant's Statement

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 for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that his "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview (s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

> Signature of Applicant

## Date



NOTES

