

Employment Application



Personal Information

Please print. You must fully and accurately complete this application. Incomplete applications will not be considered.

Position(s) applying for: _____ Date of application: _____

Name: _____ Phone: (_____) _____
Last First MI

Address: _____
Street City State Zip

Are you 16 or older? Yes No Are you 18 older? Yes No

List outside activities (please do not list activities that would reflect race, color, religion, gender, national origin, or disability): _____

Work Availability

Type of employment desired: Full Time Part Time

Number of hours available per week: _____

Do you have any commitments to another employer that might affect your employment with us? Yes No

Are you legally eligible for employment in this country (a US citizen or alien authorized to work in the United States)? Yes No

To help us consider a job that matches your availability, please specify the days/hours you would be available to work each day (ie, 8:00am to 5:00pm, 3:00pm to 7:00pm):

Monday _____ Friday _____
 Tuesday _____ Saturday _____
 Wednesday _____ Sunday _____
 Thursday _____

General Information

Have you ever worked for this company before? Yes No If so, when? _____

Are any of your relatives employed by this company? Yes No If yes, please list name(s), and relationship: _____

Have you ever been convicted of a crime, excluding misdemeanors and traffic violations? Yes No

If yes, describe in full: _____

(The existence of a criminal record will not automatically disqualify you from the job you applied for)

Education History

High School: _____ City, State: _____

From: _____ To: _____ Did you graduate? Yes No Degree: _____

College: _____ City, State: _____

From: _____ To: _____ Did you graduate? Yes No Degree: _____

Other: _____ City, State: _____

From: _____ To: _____ Did you graduate? Yes No Degree: _____

Work History

Give present or most recent position first, information must be complete and accurate.

Can we contact your current employer? Yes No

Company Name: _____ Address: _____

Phone: (____) _____ Supervisor's name and title: _____

Employment dates: From _____ To _____ Rate of Pay: _____ Position: _____

Major responsibilities: _____

Reason for leaving: _____

Company Name: _____ Address: _____

Phone: (____) _____ Supervisor's name and title: _____

Employment dates: From _____ To _____ Rate of Pay: _____ Position: _____

Major responsibilities: _____

Reason for leaving: _____

Company Name: _____ Address: _____

Phone: (____) _____ Supervisor's name and title: _____

Employment dates: From _____ To _____ Rate of Pay: _____ Position: _____

Major responsibilities: _____

Reason for leaving: _____

Have you ever been disciplined for absenteeism or tardiness? Yes No

What other special qualifications do you have not listed above? _____

Briefly state why you would like to work with our company: _____

US Military Service

Branch of Service: _____ From: _____ To: _____

Describe any special training: _____

Important, please read carefully

I understand that to be employed I must be lawfully authorized to work in the United States and be able to show the employer documents to prove this.

I understand that the company will thoroughly investigate my work and personal history and verify all data given on this application, on related papers, requested about me, and I release them from all liability for damage in providing this information. I authorize the company to secure records regarding my criminal conviction history from the appropriate law enforcement agencies.

All of the information on this application and made in conjunction with this application is correct and true to the best of my knowledge. I understand that any false or misleading statement made by me in connection with this application or the failure to disclose any material information will be grounds for immediate dismissal.

In consideration of my employment, I agree to conform to the rules and regulations of this company, and my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at the option of either the company or myself. I understand that no manager or representative, other than the president/owner of the company, has any authority to enter into any agreement for employment any specified period of time., or to make any agreement contrary to foregoing.

Signature: _____

Date: _____

Thank you for your interest in our company!