

Application for Employment

We consider applicants for all positions without regards to race, color, religion, creed, gender, national origin, age, disability or veteran status, sexual orientation or any other legally protected status.

PLEASE PRINT

Position Applied for	Date of Application
How did you learn About Us?	
<input type="checkbox"/> Advertisement	Friend <input type="checkbox"/>
	Walk-In <input type="checkbox"/>
	Relative <input type="checkbox"/>
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Other _____

Last Name:	First Name:	Middle Initial:
Address:		
Telephone Number	Social Security Number	

If you are under 21 years of age, can you provide required proof of your eligibility to work?

Yes No

Have you ever filed an application with us before? If yes, give date
Date _____

Yes No

Have you ever been employed with us before? If yes, give date
Date _____

Yes No

Are you currently employed?

Yes No

May we contact your present employer?

Yes No

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

Yes No

Proof of Citizenship or immigration status will be required upon employment

On what date would you be available for work? _____

Are you available to work: Full Time Part Time Shift Work Temporary

Are you currently on "lay-off status and subject to recall?"

Yes No

Do you have a clean driving record

Yes No

If Not Please Discribe

Have you been convicted of a felony, crime or Misdemeanor?

Yes No

If Yes, please explain _____

Are you willing to do a BCI & FBI Background check

Yes No

Education

Name of School	Course of Study	Years Completed	Diploma/Degree
High School			
Undergraduate College			
Graduate Professional			
Other (Specify)			

Describe any specialized training, apprenticeship, skills and extra-curricular activities

Describe any job-related training received in the United States Military.

Employment Experience

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

1.

Employer	Date From	Date To	Work Performed
Address			
Telephone Number	<u>Hourly Rate/</u> <u>Salary:</u>		
Job Title Supervisor	<u>Starting</u>	<u>Final</u>	
Reason for leaving			

2.

Employer	Date From	Date To	Work Performed
Address			
Telephone Number	<u>Hourly Rate/</u> <u>Salary:</u>		
Job Title Supervisor	<u>Starting</u>	<u>Final</u>	
Reason for leaving			

3.

Employer	Date From	Date To	Work Performed
Address			
Telephone Number	<u>Hourly Rate/</u> <u>Salary:</u>		
Job Title Supervisor	<u>Starting</u>	<u>Final</u>	
Reason for leaving			

List professional, trade, business or civic activities and offices held. You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

Additional Information

Other qualifications: Summarize special job-related skills and qualifications acquired from employment or other experience.

Specialized Skills	Check Skills/Equipment Operated	
___ PC	Production/Mobile Machinery (list):	Other
___ Word	_____	_____
___ Excel	_____	_____
___ Phone System	_____	_____
___ Fax	_____	_____

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied?

Yes No

References

1.

Name	Phone Number
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Address

2.

Name	Phone Number
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Address

3.

Name	Phone Number
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