



APPLICATION FOR EMPLOYMENT

FAILURE TO COMPLETE ALL SECTIONS OF THIS APPLICATION MAY DISQUALIFY AN APPLICANT FROM CONSIDERATION. THIS APPLICATION WILL REMAIN ON FILE FOR ONE YEAR AND ACTIVE FOR ONE MONTH. APPLICANTS ARE CONSIDERED ON THE BASIS OF QUALIFICATIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARITAL STATUS, VETERAN STATUS, DISABILITY OR SEXUAL ORIENTATION.

PERSONAL INFORMATION

DATE: _____ SOCIAL SECURITY NUMBER: _____

NAME: _____
(LAST) (FIRST) (MIDDLE)

(STREET) _____ (CITY) _____ (STATE) _____ (ZIP) _____

PHONE NUMBER: () _____ ARE YOU 18 YEARS OLD OR OLDER? _____ YES _____ NO

ARE YOU LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES? _____ YES _____ NO

EMPLOYMENT DESIRED

POSITION: _____ DATE YOU CAN START: _____

SALARY DESIRED: _____ CIRCLE ANY OR ALL THAT APPLY: FULL TIME / PART TIME / TEMP

ARE YOU CURRENTLY EMPLOYED? YES / NO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? _____

HAVE YOU APPLIED OR WORKED FOR RE-BATH IN THE PAST? YES / NO: IF YES, WHERE? _____

EDUCATION, EXPERIENCE AND SKILLS:

HIGHEST GRADE COMPLETED IN HIGH SCHOOL: _____ DIPLOMA: YES / NO GED: YES / NO

NAME OF HIGH SCHOOL _____ CITY _____ STATE _____

NUMBER OF YEARS ATTENDED AT TRADE SCHOOL: _____ JUNIOR COLLEGE: _____ COLLEGE: _____

COLLEGE(S) AND CITY/STATES _____

LIST ANY DEGREES RECEIVED: _____

LIST PROFESSIONAL, TRADE, BUSINESS OR CIVIL ACTIVITIES AND ANY OFFICES HELD (YOU MAY EXCLUDE ORGANIZATIONS WHICH WOULD INDICATE THE RACE, SEX, AGE, MARITAL STATUS, COLOR, NATIONAL ORIGIN OR ABILITY OF ITS MEMBERS.)

LIST ANY SKILLS OR HOBBIES WHICH MAY BE RELEVANT TO THE QUALIFICATION NECESSARY FOR THIS POSITION.

HAVE YOU EVER BEEN DISCHARGED, FIRED OR ASKED TO RESIGN FROM ANY EMPLOYMENT? IF YES, EXPLAIN.

FORMER EMPLOYERS - LIST BELOW THE LAST THREE EMPLOYERS, STARTING WITH THE MOST RECENT)

EMPLOYER'S NAME AND ADDRESS	EMPLOYER'S PHONE #	START DATE/ END DATE	POSITION/ PAY RATE	REASON FOR LEAVING
1.				

DUTIES: _____

EMPLOYER'S NAME AND ADDRESS	EMPLOYER'S PHONE #	START DATE/ END DATE	POSITION/ PAY RATE	REASON FOR LEAVING
2.				

DUTIES: _____

EMPLOYER'S NAME AND ADDRESS	EMPLOYER'S PHONE #	START DATE/ END DATE	POSITION/ PAY RATE	REASON FOR LEAVING
3.				

DUTIES: _____

REFERENCES: LIST TWO PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN FOR AT LEAST ONE YEAR.

NAME	CITY, STATE	TELEPHONE #	BUSINESS/AFFILIATION	YEARS KNOWN
1.				
2.				

HAVE YOU EVER BEEN CONVICTED OF A CRIME? _____ YES _____ NO (A CONVICTION RECORD WILL NOT NECESSARILY BE A BAR TO EMPLOYMENT). IF YES, WHAT WAS THE NATURE OF THE OFFENSE, WHEN, WHERE, AND THE OUTCOME?

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION OR IN AN INTERVIEW, INCLUDING FAILURE TO REVEAL PRIOR EMPLOYERS, SHALL BE GROUNDS FOR IMMEDIATE DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS "AT-WILL", FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITH OR WITHOUT PRIOR NOTICE AND WITHOUT CAUSE".

Signature of Applicant

Date



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