

# EMPLOYMENT APPLICATION FORM

APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS.  
This company is an Equal Employment Opportunity Employer

Position applying for \_\_\_\_\_ Date \_\_\_\_\_

## PERSONAL

Name \_\_\_\_\_  
Last First Middle Initial Soc. Sec. No \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

Telephone \_\_\_\_\_ Mobile/Beeper/Other \_\_\_\_\_

Referred by \_\_\_\_\_

Date available for work \_\_\_\_\_ If under 18, please list age \_\_\_\_\_

Are you legally eligible for employment in this country?  No  Yes  
Are you employed now?  No  Yes  
If so, may we inquire of your present employer?  No  Yes  
Have you ever applied to this company before?  No  Yes  
Have you ever been convicted of a felony?  No  Yes  
If yes, please explain. (A conviction will not necessarily disqualify you from the job)

Employment desired  FULL-TIME  PART-TIME  TEMP.  F/T or P/T

Salary requirement \$ \_\_\_\_\_ per \_\_\_\_\_

Will you work overtime if asked?  No  Yes

Hours available for work:

Mon \_\_\_\_\_ Weds \_\_\_\_\_ Fri \_\_\_\_\_ Sun \_\_\_\_\_

Tues \_\_\_\_\_ Thurs \_\_\_\_\_ Sat \_\_\_\_\_

DO YOU HAVE A DRIVER'S LICENSE?  No  Yes

What is your means of transportation to work? \_\_\_\_\_

Driver's License Number \_\_\_\_\_ State of issue \_\_\_\_\_ Expiration date \_\_\_\_\_

Have you had any accidents during the past three years?  No  Yes  
 Have you had any moving violations during the past three years?  No  Yes

Please list two references other than relatives or previous employers.

Name _____	Name _____
Position _____	Position _____
Company _____	Company _____
Address _____	Address _____
_____	_____
Telephone _____	Telephone _____
Emergency Contact	
Name _____	Phone _____
Relation _____	

**EDUCATION**

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. Or Trade School				
Professional School				

**EMPLOYMENT HISTORY**

Company Name	Telephone ( )
Address	Employed-(Month & Year)
Name of supervisor	Weekly Pay--(Starting & Ending)
Title & description of work	Reason for leaving

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PLEASE READ THE FOLLOWING BEFORE SIGNING THIS APPLICATION.

I hereby certify that all entries both the application and attachments are true and complete, and I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part of any employment in the service of the company. I understand that all information on this application is subject to verification and I consent to criminal history background checks. I also consent that you may contact reference, former employers, and educational institutions listed regarding this application.

I further authorize the company to rely upon and use, as it sees fit, any information received from such contacts.

I have read and understand the above.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Applicants for employment shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, political affiliation, national origin, disability, marital status, gender or age.

*Thank you for completing this application and for your interest in our business.*