



APPLICATION FOR EMPLOYMENT

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Home Phone	Cell phone		
E-mail Address	Position Applied For		
Desired Hourly Rate \$ /hr	Desired Salary \$ /yr		
Date Available	How did you learn about this opening?		
If employed, can you submit verification of your legal right to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Have you ever worked here before? If so, when? YES <input type="checkbox"/> NO <input type="checkbox"/>
Are you available for: (Check all that apply)	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part time	<input type="checkbox"/> Overtime <input type="checkbox"/> Temporary
Any limitations on the hours, days or time you are available to work?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other training or education related to the job you are applying for:			

PLEASE BE SURE TO COMPLETE NEXT PAGE

PLEASE COMPLETE ALL JOB HISTORY INFORMATION EVEN IF RESUME IS ATTACHED

EMPLOYMENT HISTORY		
List present or most recent position first. May we contact your present employer? YES <input type="checkbox"/> NO <input type="checkbox"/>		
Employer	Type of Business	Phone ()
Address/ Location		Supervisor
Position/ Job Title		
Job Duties/ Responsibilities:		
Dates Employed:	From To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		
Employer	Type of Business	Phone ()
Address/ Location		Supervisor
Position/ Job Title		
Job Duties/ Responsibilities:		
Dates Employed:	From To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		
Employer	Type of Business	Phone ()
Address/ Location		Supervisor
Position/ Job Title		
Job Duties/ Responsibilities:		
Dates Employed:	From To	Reason for Leaving
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Employer	Type of Business	Phone ()
Address/ Location		Supervisor
Position/ Job Title		
Job Duties/ Responsibilities:		
Dates Employed:	From To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		

APPLICANT'S CERTIFICATION AND RELEASE	
<p>I certify that the facts given in my resume and/or Application for Employment are true and correct. I understand that if employed, any false or misleading statements, omissions, or failure to fully answer any requested item on this application or on any document used to secure employment shall be grounds for rejection of this application or for my termination from employment, if I am employed, regardless of when such information is discovered. I authorize the Company to secure background information on my work record, education and other matters related to my suitability for employment. I authorize my references and background sources to disclose information about me to the Company, without giving me prior notice of such disclosure. I hereby release the Company, my former employers and all other sources from any and all claims, demands or liabilities arising out of or in any way related to securing such information or disclosures.</p> <p>I understand that nothing contained in the application, or any information conveyed during any interview which may be granted, or during my employment, if hired, is intended to create an employment contract between me and the Company. I understand that any employment with this Company is "at will," which means that either I or the Company can terminate the employment relationship at any time with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or executive of the Company has any authority to alter the foregoing unless a specific term of employment is in writing and signed by the President and CEO.</p>	
Signature	Date