

## **EMPLOYMENT APPLICATION**

### **INSTRUCTIONS:**

- (1) If you need help filling out this application form, please notify the person who gave you this form and every reasonable effort will be made to meet your needs.
- (2) Please read the Notice to Applicant below.
- (3) Please complete all pages, writing your responses legibly, in ink. Use "N/ A" if a question does not apply to you. Incomplete or illegible applications may be rejected.
- (4) If you need more space, please use a separate piece of paper.
- (5) Your application will only be valid for 30 days.
- (6) You must sign the Applicant Certification at the end.

<u>NOTICE TO APPLICANT:</u> This application is intended to be used to evaluate your qualifications for employment. This is not an employment contract. If you do not answer all questions completely and accurately or if you provide false or misleading statements, either in this application or in an interview, if applicable, that will be grounds for terminating the application process or terminating employment if you have been hired. All applicants will be considered regardless of race, color, religion, sex, national origin, age, disability, or any other protected status under the law.

### PERSONAL INFORMATION:

Date:	Social Security Number: _		Email:	
Full Name: —				
Position(s) Applied For:				
Current Address:				
Home Phone:		Cell Phone:		
Driver's License/ID Card	Number:	Issuing State:		
Other Names You Have U	sed:			
Emergency Contact:				
Are you Eligible to Work in	the United States:			
Dates of Previous Employn	nent Here, if any:			
Dates of Previous Applicat	ions Here, if any:			
AVAILABILITY:				
What date can you start w	ork:			
Describe the days and hou	rs you are available to work	c:		

# EDUCATION:

Please state whether yo	u have a high school diploma of	r GED:	
vocational school, and	u have attended any trade or if so, what school, what trade, r license did you obtain:		
	u have attended any college what school and what degree(s)		
Please describe any oth may qualify for the posi	er education you have that ition(s) sought:		
	- ·		gical order, please provide the lease also explain any gaps in
Most Recent Employer Company/Employer:_	<u></u>	Address:	
Dates Employed:		Phone:	
Supervisor:		Job Title:	
Final Pay Rate:		May We Contac	ct:
Reason for Leaving:			
Second Most Recent Em Company/Employer:	<u>oloyer</u>	Address:	
Dates Employed:		Phone:	
Supervisor:		Job Title:	
Final Pay Rate:		May We Contac	et:
Reason for Leaving:			
Third Most Recent Employer:	<u>oyer</u>	Address:	
Dates Employed:		Phone:	
Supervisor:		Job Title:	

Final Pay Rate:		May We Conta	
Reason for Leav	/ing:		
Fourth Most Re Company/Empl		Address:	
Dates Employed	d:	Phone:	
Supervisor:		Job Title:	
Final Pay Rate:		May We Conta	nct:
Reason for Leav	ving:		
JOB SKILLS:			
Please describe	e any other job skills you have that o	qualify you for the pos	ition(s) you are seeking:
PERSONAL REFI	ERENCES:		
Please identify	three personal references who are	not current or former	employers or relatives.
Name:		_ Phone:	
Address:			
Name:		_ Phone:	
Address:			
Name:		_ Phone:	
Address:			

#### **CRIMINAL HISTORY:**

Please note that a conviction record will not necessarily be a bar to employment. Factors such as a whether the offense relates to the duties of the position(s) sought, your age at the time of the offense, how long it has been since the offense, the seriousness and nature of the offense, and rehabilitation will all be considered.

If you have ever been convicted, pled guilty, pled no contest or nolo contendere, placed on probation/deferred adjudication, or paid a fine, or if you are currently awaiting trial for any criminal offense, please identify the offense, date of the offense, and location of the court. You need not identify minor traffic offenses (Class C Misdemeanors).

## <u>AUTHORIZATION</u> TO INVESTIGATION

I hereby authorize employer to contact and obtain information from all references, employers, and educational institutions, and to otherwise take action to verify the accuracy of the information in this application. I hereby release from liability the employer and its representatives for any act or omission taken in furtherance of verifying the accuracy of the information in this application. I hereby release from liability any person or entity who provides information to employer to verify the accuracy of the information in this application.

### **APPLICANT CERTIFICATION:**

By signing below, I certify that:

- (1) I completed this application, and all information contained in the application is true and complete to the best of my knowledge;
- (2) I understand that failing to answer all questions completely and accurately or providing false or misleading statements-either in this application or in an interview, if applicable-will be grounds for terminating the application process or terminating employment;
- (3) If I am hired, my employment will be "at will," meaning that either I or the employer may terminate the employment relationship at any time, for any reason or no reason at all;
- (4) I understand that only \_\_\_\_\_\_ has the authority to enter into an employment agreement with me for any period of time, and that any such agreement must be in writing and signed;
- (5) I understand that I must successfully complete a pre-employment drug screening and/or preemployment physical examination; and
- (6) I understand I will be required to provide verification of my identity and authorization to work in the United States.

Applicant Signature:	
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