



Application for Employment

Position(s) applied for _____ Date of application _____

Name: _____
Last First Middle

Address: _____
Street City State Zip Code

Telephone #: () _____ Social Security #: _____

Have you ever been employed here before?..... Yes No

Are you legally eligible for employment in this country?..... Yes No

Date available for work..... _____

Type of employment desired: Full Time Part Time

Are you able to meet the attendance requirements of the position?..... Yes No

Have you been convicted of a crime in the last seven (7) years?..... Yes No

If yes, please explain _____

Conviction will not necessarily be bar to employment: Each instance and explanation will be considered to the position for which you are applying.

Driver's license number if driving is an essential job function: _____ State _____

EMPLOYMENT HISTORY

Provide the following information for your past four (4) employers, starting with the most recent.

From: _____ To: _____ Employer: _____ Telephone: _____
Job Title: _____ Address: _____
Supervisor: _____ Summarize nature of work performed: _____

Reason for leaving: _____ Hourly Rate/Salary: _____
From: _____ To: _____ Employer: _____ Telephone: _____
Job Title: _____ Address: _____
Supervisor: _____ Summarize nature of work performed: _____

Reason for leaving: _____ Hourly Rate/Salary: _____
From: _____ To: _____ Employer: _____ Telephone: _____
Job Title: _____ Address: _____
Supervisor: _____ Summarize nature of work performed: _____

Reason for leaving: _____ Hourly Rate/Salary: _____
From: _____ To: _____ Employer: _____ Telephone: _____
Job Title: _____ Address: _____
Supervisor: _____ Summarize nature of work performed: _____

Reason for leaving: _____ Hourly Rate/Salary: _____



SKILLS AND QUALIFICATIONS

Summarize any training, skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying: _____

EDUCATIONAL BACKGROUND

Name & Address

Degree: Yes No

High School

Degree: Yes No

College

Degree: Yes No

Other

REFERENCES

Name Address Telephone

Name Address Telephone

Name Address Telephone

Name Address Telephone

If hired, will you abide by the safety rules of this company?..... Yes No

If injured, will you accept the medical facility recommended by your employer?..... Yes No

I hereby declare all the foregoing statements to be true and correct. I acknowledge the employer to reserve the right to perform periodic drug testing, if necessary. I also acknowledge that should I be hired, employment is terminable at any time, at the election of the either the employer or the employee, with or without cause. I understand, that if hired, no employment agreement exists between myself and the employer.

Applicant's Signature