



Application for Employment

* Fields marked in red are required to be completed

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for		Date of application	
Referral Sources	<input type="checkbox"/> Advertisement <input type="checkbox"/> Employee	<input type="checkbox"/> Relative/Friend	<input type="checkbox"/> Government Employment Agency
	<input type="checkbox"/> Private Employment Agency	<input type="checkbox"/> Other	
Name of source (if applicable)			
Name	Last	First	Middle
Address	Street	City	State Zip Code
Telephone #	Mobile/ Other Phone #	E-mail Address	

If you are under 18 and it is required, can you furnish a work permit? ----- Yes No

Have you submitted an application here before? ----- Yes No

If yes, give date(s) and position(s) -----

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

If yes, give dates ----- From To

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

Date available for work What is your desired salary range? ----- \$ _____

Type of employment desired Full-Time Part-Time Temporary Educational Co-Op

Will you travel if the job requires it? ----- Yes No

Will you work overtime if required? ----- Yes No

Have you ever been bonded? ----- Yes No

Answering "yes" to this question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account. You may respond "no" if conviction or release from prison did not occur within the last ten (10) years.

If yes, please provide date(s) and details

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

Employment History

This section must be completed. Do not indicate "see resume".

Provide the following information of your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.

EMPLOYER	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
	FROM	TO	
ADDRESS			
STARTING JOB TITLE/FINAL JOB TITLE			
IMMEDIATE SUPERVISOR AND TITLE			
REASON FOR LEAVING			
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER			
EMPLOYER	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND JOB RESPONSIBILITIES
ADDRESS	FROM	TO	
STARTING JOB TITLE/FINAL JOB TITLE			
IMMEDIATE SUPERVISOR AND TITLE			
REASON FOR LEAVING			
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER			
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STARTING JOB TITLE/FINAL JOB TITLE			
IMMEDIATE SUPERVISOR AND TITLE			
REASON FOR LEAVING			
MAY WE CONTACT FOR REFERENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER			

Skills and Qualifications

Summarize any special 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 (if job-related)

A. List last three (3) schools attended, starting with most recent. **B.** List number of years completed. **C.** Indicate degree or diploma earned, if any. **D.** Grade Point Average or Class Rank. **E.** Major field of study **F.** Minor field of study (if applicable).

A. SCHOOL	B. NUMBER OF YEARS COMPLETED	C. DEGREE /DIPLOMA	D. GPA CLASS RANK	E. MAJOR	F. MINOR

References

List name and telephone number of three business/work references who are **not** related to you and are **not** previous supervisors.

If not applicable, list three school or personal references who are not related to you.

NAME	TELEPHONE	NO. OF YEARS KNOWN

Additional Information

List any additional information you would like us to consider.

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resumé or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that I may include any verifiable volunteer work experience under the employment history section of this application.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant

Date

(SIGN BY ENTERING YOUR COMPLETE NAME AND DATE WHEN APPLICATION WAS COMPLETED)