

# EMPLOYMENT APPLICATION

DATE: \_\_\_\_\_

All applicants are evaluated without regard to race, color, religion, gender, national origin, age, marital or veteran status or any other legally protected status.

Position Sought: \_\_\_\_\_

Name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

How did you learn of this position? If referred, by whom? \_\_\_\_\_

On what date would you be available to begin work? \_\_\_\_\_

Desired Wage: \$ \_\_\_\_\_

On which days of the week and what times are you available to work? \_\_\_\_\_

Are you authorized to work in the U.S. without any restriction?  YES  NO

Have you ever been convicted of a felony?  YES  NO

Have you ever been involuntarily terminated or asked to resign from any position of employment?  YES  NO

If YES, describe circumstances: \_\_\_\_\_

## EDUCATION *(begin with high school)*

School Name	Location	Years	Degree Received	Major

Other training or certifications held: \_\_\_\_\_

## PREVIOUS EMPLOYMENT *(begin with most recent)*

Employer: _____	Dates of Employment: _____	
Job Title: _____	City/State & Phone No: _____	Supervisor Name: _____
Duties Performed: _____	Reason for Leaving: _____	Wages/Salary: _____
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Job Title: _____	City/State & Phone No: _____	Supervisor Name: _____
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## ACKNOWLEDGMENT AND AUTHORIZATION

I certify that answers given herein are true and complete to the best of my knowledge.

I hereby understand and acknowledge that any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at any time and the employer may discharge employee at any time with or without cause.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

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

Date \_\_\_\_\_