



## APPLICATION FOR EMPLOYMENT

*Federal law prohibits discrimination on the basis of race, color, religion, sex, national origin, age, disability, or other protected status.*

PLEASE PRINT

**PERSONAL DATA:**

Position(s) applied for: \_\_\_\_\_ Date: \_\_\_\_\_

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

Address: \_\_\_\_\_  
First Middle Last

Street City State/Zip

Phone Number: \_\_\_\_\_  
Daytime Evening

Social Security Number \_\_\_\_\_ Driver's License # \_\_\_\_\_

If driving is essential for the job

State License Issued In \_\_\_\_\_ Expiration Date \_\_\_\_\_

How did you hear about this position? \_\_\_\_\_

Can you prove you are legally eligible to work in the U.S.? \_\_\_\_\_

If under 18 years of age, can you furnish work permit if required? \_\_\_\_\_ If not, please explain: \_\_\_\_\_

If hired, are you able to get to work and meet attendance requirements every day? \_\_\_\_\_

Have you been convicted of a felony in the past five years? \_\_\_\_\_ If so, please explain: \_\_\_\_\_

Conviction does not automatically bar you from employment consideration

Type of employment wanted: Full time \_\_\_\_\_ Part Time \_\_\_\_\_ Temporary \_\_\_\_\_

Date available for work \_\_\_\_\_ What hours do you prefer to work? \_\_\_\_\_

Can you work overtime if required? \_\_\_\_\_ Weekends if required? \_\_\_\_\_

Please list the hours you cannot work: \_\_\_\_\_

Will you relocate if the work requires it? \_\_\_\_\_ Will you travel if required? \_\_\_\_\_

**EDUCATION BACKGROUND:** *Please circle the highest level of education attained*

Elementary 1-5 Junior High 6 7 8 High School 9 10 11 12 G.E.D.

Technical/Trade School (Which Field) \_\_\_\_\_ Military Education: \_\_\_\_\_

College 1 2 3 4 College Name and City: \_\_\_\_\_

Graduate School: \_\_\_\_\_ Degree Earned: \_\_\_\_\_ Year: \_\_\_\_\_ Major: \_\_\_\_\_

Are you currently on school? \_\_\_\_\_ What level? \_\_\_\_\_

Summarize any special skills or training that may qualify you for the position you are applying for:

**EMPLOYMENT HISTORY:** *Please list your last four employees, starting with most recent.*

1. Employer: \_\_\_\_\_ Address \_\_\_\_\_ Phone: \_\_\_\_\_ Job Position \_\_\_\_\_

Supervisor's Name & Title: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Describe Duties: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

2. Employer: \_\_\_\_\_ Address \_\_\_\_\_ Phone: \_\_\_\_\_ Job Position \_\_\_\_\_

Supervisor's Name & Title: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Describe Duties: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

3. Employer: \_\_\_\_\_ Address \_\_\_\_\_ Phone: \_\_\_\_\_ Job Position \_\_\_\_\_

Supervisor's Name & Title: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Describe Duties: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

4. Employer: \_\_\_\_\_ Address \_\_\_\_\_ Phone: \_\_\_\_\_ Job Position \_\_\_\_\_

Supervisor's Name & Title: \_\_\_\_\_ Reason for leaving: \_\_\_\_\_

Describe Duties: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Ending Date: \_\_\_\_\_

Please explain any employment gaps found above: \_\_\_\_\_

May we contact employers listed above? \_\_\_\_\_ if there are any you do not wish us to contact, please indicate them:

I certify that the statements contained herein are true and correct to the best of my knowledge, and I understand that any false statements or omissions by me on this application and any other required document is considered a cause for denial of employment or discharge, when ever discovered.

I understand that this document is an application for employment, and does not constitute an agreement or contract for employment of any length of time. If hired, I have the freedom to quit at any time. The employer also has the right to terminate my employment with or without a cause, the exceptions being as required by law.

I authorize the above employer to investigate all information in the above application for employment. The employer has the right to contact previous employers, schools, and any other references to verify information. I release the employer from any liability in gathering this information. I release from liability any companies or institutions supplying this information. After termination of employment, for whatever reason, I release the above employer from liability for any information supplied to future potential employers.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_