

Please print legibly, fill out this form completely, and return to our employment representative for employment consideration. We are an equal opportunity employer and will not discriminate on any legal basis, including but not limited to race, color, religion, creed, sex, age, disability, national origin, or veteran status.

Personal Information:

Name (1 st , Mid., Last)	_____	Date	_____
Street Address	_____	City, State, Zip	_____
Phone #	_____	Email Address	_____
Social Security #	_____	Referred By	_____
Position Applied For	_____	Full/Part-Time	_____
Desired Salary	_____	Date Can Start	_____
Days of Week & Times Available for Work	_____		

Are you 18 years of age or older? [If not, employment is subject to verification of minimum legal age.]	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Can you submit verification of your legal right to work in the U.S. at the time of employment? [Verification of Form I-9 is required to be provided to the employer within 3 days of hire]	<input type="checkbox"/>	<input type="checkbox"/>
If driving is a requirement for the job you are applying for, do you have a valid driver's license?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever applied to our company previously? If "Yes", where & when?	<input type="checkbox"/>	<input type="checkbox"/>
May we contact your present employer?	<input type="checkbox"/>	<input type="checkbox"/>
May we contact your prior employers? If "No", please explain.	<input type="checkbox"/>	<input type="checkbox"/>

How did you learn of our Company? _____

Education:

School	Name & Location of School	Course of Study	# of Years Completed	Did You Graduate? (Yes/No)	Degree or Diploma
College					
High					
Trade					
Other					

Specialized Technical Skills:

Employment History: Provide complete employment record starting with your present or most recent employer. You may include volunteer and military experience.

	Present/Recent	Employer 2	Employer 3	Employer 4
Employer Name				
Start Date				
End Date				
Street Address				
City, State Zip				
Phone #				
Position				
Job Duties				
Supervisor				
End Pay Rate				
Reason for Leaving				

References: Provide the names of 3 persons not related to you that have knowledge of your work experience.

Name	Company	Position	Phone #

Certification:

I certify that the information provided in the Application for Employment is true, correct, and complete. I understand that any misstatements or omission of the facts of this Application for Employment may result in me not being hired, or my employment terminated if already hired. I recognize employment with the Company is on an employment at will basis and my employment may be terminated at any time and for any reason. I am aware that an offer of employment does not imply or express a contract to continued employment or guarantee any fixed terms or conditions of employment. I recognize the President is the only Company representative that has the authority to enter into an employment relationship with anyone for a fixed period of time or contrary to employment at will. I understand I need to become familiar with, understand, and follow all of the employer's policies and procedures, and these policies and procedures may be eliminated or modified by the employer from time to time, and I consent to such changes. I authorize the Company to verify the information contained on this Application for Employment and my resume, and conduct any appropriate background checks necessary, including but not limited to the areas of criminal, education, and employment (including reference checks). I release all parties from any liability arising out of any completed background checks.

Applicant Signature

Date