



EMPLOYMENT APPLICATION – PLEASE PRINT



APPLICANT NAME: _____ DATE: _____

General Information

Phone #: _____ Email: _____

Address: _____ City, State, Zip: _____

What position(s) are you applying for? _____ When can you start? _____

Days/ hours you are available for work: _____ Salary desired: \$ _____ per Hour

If hired, would you have transportation to/from work? Yes _____ No _____

Are you over the age of 18? Yes _____ No _____

If hired, can you present evidence of your legal right to work in the U.S.? Yes _____ No _____

If hired, are you willing to submit to a controlled substance test? Yes _____ No _____

Are you able to perform the job functions applying for without reasonable accommodations? Yes _____ No _____

If no, describe the functions that cannot be performed: _____

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/ employees to perform essential functions. It is possible that a hire may be tested on skill/ agility and may be subject to a medical examination conducted by a medical professional.)

Have you ever been convicted of a criminal offense (felony or misdemeanor)? Yes _____ No _____

If yes, please state the nature of the crime(s), when and where convicted and disposition of the case:

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

Education

Name of High School: _____ Did you graduate? Yes _____ No _____

Name of College/ University: _____ Did you graduate? Yes _____ No _____

Please describe any other experience, training, qualifications, or skills that make you especially suited for working with us: _____

Employment History

Are you currently employed? Yes _____ No _____

If yes, would you like to be contacted before we contact your current employer? Yes _____ No _____

Name of Previous Employer: _____

Salary/hourly rate earned: _____ Dates of Employment: _____

Position & Duties: _____ Reason for Leaving: _____

References *(Please give some professional references who can attest to your character, personality and work history)*

Name and Position: _____ Phone #: _____

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My answers on this application and on any resume I provide are complete and true. I understand that the submission of any false or incomplete information in connection with my application, whether on this or other documents or in interviews, will be cause for the termination of my employment at any time. I authorize the Employer and its agents to verify any information related to my application or resume. I also authorize and direct individuals, schools, employers, and law enforcement or government officials to freely provide any information concerning my background, and hereby release any and all of them from any liability for doing so. If I am employed, I understand that I will be employed on an at-will basis for an indefinite period of time and that my employer may terminate my employment at any time and for any reason.

Employee Signature _____ Date: _____