



**APPLICATION – PLEASE PRINT**

**APPLICANT NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**WORKSITE EMPLOYER:**

<b>Home Phone:</b>	<b>Email Address:</b>
<b>Work Phone:</b>	
<b>Cell Phone:</b>	<b>Please Indicate Age if Under 18 Years:</b>
<b>Address:</b>	
<b>City, State, Zip:</b>	<b>Job Title:</b>

How were you referred to us? \_\_\_\_\_

**Employment Information:**

What position(s) are you applying for? \_\_\_\_\_

Are you applying for:    Temporary work (summer/holiday)?    Yes \_\_\_\_\_ No \_\_\_\_\_  
                                     Regular part-time work?                            Yes \_\_\_\_\_ No \_\_\_\_\_  
                                     Regular full-time work?    Yes \_\_\_\_\_ No \_\_\_\_\_

Days/ hours you are available for work: \_\_\_\_\_

If hired, when can you start working? \_\_\_\_\_

Are you available to work overtime?    Yes \_\_\_\_\_ No \_\_\_\_\_

Salary desired:    \$ \_\_\_\_\_ per Hour \_\_\_\_\_ / Year \_\_\_\_\_

**Personal Information:**

Have you every applied to us or worked for us before?    Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain and include date(s): \_\_\_\_\_

Do you know anyone currently working for us?    Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, print name and relationship: \_\_\_\_\_

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

Are you over the age of 18?    Yes \_\_\_\_\_ No \_\_\_\_\_

*(If under 18, hire is subject to verification of minimum legal age.)*

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 essential job functions applying either with/ without reasonable accomodation?    Yes \_\_\_\_\_ No \_\_\_\_\_

If no, describe the functions that cannot be performed: \_\_\_\_\_

*(Note: We comply with the ADA and consider reasonable accomodation 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, Training, Experience:**

Name of High School: \_\_\_\_\_  
Did you graduate? Yes \_\_\_\_\_ No \_\_\_\_\_

City, State: \_\_\_\_\_  
Degree/ Diploma earned: \_\_\_\_\_

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

City, State: \_\_\_\_\_  
Degree/ Diploma earned: \_\_\_\_\_

Name of Vocational School: \_\_\_\_\_  
Did you graduate? Yes \_\_\_\_\_ No \_\_\_\_\_

City, State: \_\_\_\_\_  
Degree/ Diploma earned: \_\_\_\_\_

Military Branch: \_\_\_\_\_ Rank: \_\_\_\_\_ Total years of Service: \_\_\_\_\_  
Skills/ Duties: \_\_\_\_\_

Do you speak/ write/ understand any foreign languages? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, indicate language(s) and degree of fluency: \_\_\_\_\_

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

**Employment History:**

***This section must be completed even if you have attached a resume. Please date back 5 years and account for all periods of unemployment.***

Are you currently employed?

Yes \_\_\_\_\_ No \_\_\_\_\_

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

**Name of Employer:** \_\_\_\_\_  
Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Dates of Employment: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_  
Nature of Business: \_\_\_\_\_  
Salary/hourly rate earned: \_\_\_\_\_  
Position & Duties: \_\_\_\_\_

May we contact this employer for references?

Yes \_\_\_\_\_ No \_\_\_\_\_

**Name of Employer:** \_\_\_\_\_  
Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Dates of Employment: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_  
Nature of Business: \_\_\_\_\_  
Salary/hourly rate earned: \_\_\_\_\_  
Position & Duties: \_\_\_\_\_

May we contact this employer for references?

Yes \_\_\_\_\_ No \_\_\_\_\_

**Name of Employer:** \_\_\_\_\_  
Phone: \_\_\_\_\_  
Address: \_\_\_\_\_  
Dates of Employment: \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_  
Nature of Business: \_\_\_\_\_  
Salary/hourly rate earned: \_\_\_\_\_  
Position & Duties: \_\_\_\_\_

May we contact this employer for references?

Yes \_\_\_\_\_ No \_\_\_\_\_

### References

Give three or more professional references who can attest to your character, personality and work history.  
*\*\*Do not include family members or supervisors listed on the previous page.*

Name and Position	Address	Telephone Number

Have you worked or attended school under any other name?  Y  N

If yes, please provide name: \_\_\_\_\_

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 rejection of my application or 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: \_\_\_\_\_