

Application For Employment

An Equal Opportunity Employer
M / F / V / D

Note: Please answer all questions. Be sure to date and sign this application. Applicants may request assistance, if needed, to complete the application.

Personal Information			
Name (Last, First, Middle)			
Address		City	State Zip
Phone Number	Cell Number	Email Address	
Are you under age 18?		If yes, do you have work permit?	
Position			
Position you are applying for		Shift	
Date available	Referred by		
Are you willing to relocate?			
Have you applied at this company previously?		Date / /	
Have you previously worked for this company?		Date / /	
Do you have relatives employed by this company?		If yes, please provide name and relationship below.	
Relative's Name		Relationship to Applicant	
Relative's Name		Relationship to Applicant	
Relative's Name		Relationship to Applicant	
Education			
High School Name	Location	Highest Grade Completed	Diploma Received
Trade School/Other	Location	Area of Study	Certificate Received
College/University	Location	Major	Degree Received
Graduate School	Location	Major	Degree Received
List scholastic honors received			
Are you currently enrolled in school?	School Name	Location	Course of Study

U.S. Military Service

Branch	Last Rank
Date Entered / /	Discharge Date / /
Duty/Specialized Training	Reserve Status

General

Have you ever been convicted of a violation of any federal, state, county or municipal law other than minor traffic violations?

If yes, please explain:

NOTE: A "yes" answer to this question will not automatically disqualify you from employment with the Company. Any conviction will be evaluated by the Company in light of the position that you are seeking.

Employment Record

Begin with the most recent employer. Include prior employment with this Company.

Employer name and address		Position title, duties and skills	Start date / /	End Date / /
Ending rate of pay \$			Reason for Leaving	
May we contact?				
Employer name and address		Position title, duties and skills	Start date / /	End Date / /
Ending rate of pay \$			Reason for Leaving	
May we contact?				
Employer name and address		Position title, duties and skills	Start date / /	End Date / /
Ending rate of pay \$			Reason for Leaving	
May we contact?				
Employer name and address		Position title, duties and skills	Start date / /	End Date / /
Ending rate of pay \$			Reason for Leaving	
May we contact?				

Administrative Applicants Only

Computer (hardware/software) skills

Office Equipment

Professional Licenses or Certificates

Typing speed WPM

Skilled Trade Applicants Only

List tools/machines on which you have skills and length of experience.

Professional Licenses or Certificates

Additional Information

List any additional information about yourself relative to the position you are applying.

What is your wage expectation for this position? \$

Personal References (Please list three with address and phone.)

Name	Address	Phone

Applicant's Statement

1. **Verification:** I hereby certify that all answers given on this application (including supplements) are true and complete to the best of my knowledge. I understand that any misrepresentation or omission of facts given in my application and/or interviews may be sufficient cause for dismissal if and when discovered.
2. **Application:** I understand that completion of this application by me does not indicate there are any positions available and does not in any way obligate this Company.
3. **Authorization and Release:** I authorize this Company to make inquiries into all statements made by me and to obtain any information, transcripts, records, or documents pertaining to my background including but not limited to my personal, employment and financial history and other related matters. I authorize all schools, individuals, and employers to respond to inquiries in connection with my application. I hereby release all parties, including this Company, from any and all liability or damages arising therefrom.
4. **Employment-at-Will:** I understand that this Employment Application and any other Company documents are not promises or contracts of employment. Should I be employed, I understand that my employment will not be for any particular period of time and will be at will. I can therefore terminate my employment with or without cause and with or without notice at any time and the Company has a similar right. I understand that no manager or representative of the Company has any authority to enter into any agreement for employment for any specified period of time or make any agreement contrary to the foregoing, except that a corporate officer may do so in writing.
5. **Physical Examination and Health Statement:** I understand that I may be required to complete a health statement and submit to a pre-employment physical after an offer of employment has been made. I release the Company from any and all liability incident to the examination.
6. **Alcohol and Drug Testing:** I agree to submit to a urinalysis and/or blood test for the presence of drugs or alcohol and understand that my offer of employment will be contingent upon the results of these tests. I agree to such an examination and/or testing at the Company's expense. I authorize release of the results to the Company and release the Company from any and all liability incident to the testing.
7. **Company Policies:** If this application is considered favorably, I agree to abide and comply with all rules and policies of this Company. I understand that if I do not do so, I may be subject to disciplinary action, up to and including discharge.

I have read each of the above statements:

Date:

Signature:

This application for employment shall be considered active for 30 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview	Date	Interviewer
Remarks		
Employed	Date of Employment	Hourly Rate/Salary \$
Job Title		Department
Hired By (Name)	Title	Date

NOTES