

# Application for Employment

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

Applicant Name \_\_\_\_\_ Date \_\_\_\_\_

Position(s) applied for or type of work desired \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Type of work desired (mark one)                      Full-Time                      Part-Time                      Temporary

Date you will be available to start work \_\_\_\_\_

Do you have any objections to working overtime if necessary?                      \_\_\_\_\_ Yes                      \_\_\_\_\_ No

Can you travel if required by this position?                      \_\_\_\_\_ Yes                      \_\_\_\_\_ No

Have you previously been employed by this organization?                      \_\_\_\_\_ Yes                      \_\_\_\_\_ No

If hired, can you submit proof of legal employment authorization and identity?                      \_\_\_\_\_ Yes                      \_\_\_\_\_ No

If under 18, can you furnish a work permit if it is required?                      \_\_\_\_\_ Yes                      \_\_\_\_\_ No

## EMPLOYMENT HISTORY

Please provide all employment information for your past 3 employers starting with the most recent.

Are you employed now? \_\_\_\_\_ May we contact your present employer? \_\_\_\_\_

Employer \_\_\_\_\_ Position Held \_\_\_\_\_

Address \_\_\_\_\_ Telephone # \_\_\_\_\_

Immediate supervisor and title \_\_\_\_\_

Dates employed                      From: \_\_\_\_\_                      To: \_\_\_\_\_

Job Summary \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Employer \_\_\_\_\_ Position Held \_\_\_\_\_

Address \_\_\_\_\_ Telephone # \_\_\_\_\_

Immediate supervisor and title \_\_\_\_\_

Dates employed                      From: \_\_\_\_\_                      To: \_\_\_\_\_

Job Summary \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

**EMPLOYMENT HISTORY (CONTINUED)**

Employer \_\_\_\_\_ Position Held \_\_\_\_\_  
Address \_\_\_\_\_ Telephone # \_\_\_\_\_  
Immediate supervisor and title \_\_\_\_\_  
Dates employed from: \_\_\_\_\_ to: \_\_\_\_\_  
Job Summary \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

**OTHER SKILLS AND QUALIFICATIONS**

Summarize any job-related training, skills, licenses, certificates, and/or other qualifications.

\_\_\_\_\_  
\_\_\_\_\_

**MILITARY EXPERIENCE**

Branch of Service \_\_\_\_\_ Rank/Type of Service \_\_\_\_\_  
Job-Related Training Experience \_\_\_\_\_

**EDUCATIONAL HISTORY**

List school name and location, years completed, course of study, and any degrees earned.

High School \_\_\_\_\_  
College \_\_\_\_\_  
Technical Training \_\_\_\_\_  
Other \_\_\_\_\_

**WORK-RELATED REFERENCES (DO NOT INCLUDE RELATIVES)**

Name	Occupation	Contact Information

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make decisions and all other persons or organizations for providing such information.

I understand that employment with this Company is at-will, meaning that I or the Company may terminate my employment at any time, or for any reason consistent with applicable state or federal law.

**I understand this application will be active for a period of 90 days; after that time, if I wish to be considered for employment, I must submit a new application. I certify that all statements in this completed application are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal to hire.**

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