

Applicants will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handican or veteran status

EMPLOYMENT APPLICATION

PERSONAL

Last Name	First	Middle	Date
Address			Home Telephone ()
City, State, Zip			Cell Phone ()
Email Address:			
Have you ever been emploin If yes, when?	eyed with us?		Position desired
Are you legally eligible for	employment in the United Stat	tes?	Pay expected
Referred by			Date available
Are you 18 years of age or			Will you work overtime if asked?
	e employees to be 18 years or old	ler)	
Special training or skills			Social Security #
			N/A

EDUCATION

School	Name and location of school	Course of study	No. years completed	Did you graduate?
High School				
Business/Trade/ Technical				
College				
Other				

REFERENCES

Please provide names of three people outside of relatives who can be contacted regarding your qualifications, work habits and character.

Name	Address	Phone	Relationship	Known how long?

EMPLOYMENT

Employer	Telephone
Address	Dates employed (month and year) From To
Name of supervisor	Starting Salary Ending Salary
State title and description of duties	Reason for leaving
May we contact this employer? If no, explain	·
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Employer Address	Dates employed (month and year) From To
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PLEASE READ AND UNDERSTAND THIS STATEMENT BEFORE SIGNING YOUR APPLICATION

The information I provided in this Application of Employment is true. False, incomplete or misrepresented information will be sufficient cause for my application to be rejected or, if discovered after I am employed, cause for immediate termination of my employment.

I authorize the employer to obtain information about me from previous employers, educational institutions and other parties to verify the accuracy of information in this application, a related employment resume or personal interview. I waive all rights and claims I may otherwise have against the employer or its representatives, for seeking, and using information to evaluate my employment request and all other persons who provide information for this purpose. This application will expire in 30 days. Unless otherwise notified, I understand that my status as an applicant will end. I may re-apply for employment in the future by completing a new application.

This application is not an employment agreement. If I accept an offer of employment I understand the employer may terminate my employment at any time, with or without cause and without prior notice, unless required by law. I understand that no one, other than an executive officer of the employer, has authority to enter into any employment agreement with terms contrary to the foregoing and then only in writing signed by such officer.

I ACCEPT ALL TERMS AND CONDITIONS IN THE ABOVE STATEMENT