



EMPLOYMENT APPLICATION FORM

PLEASE FILL OUT CLEARLY AND COMPLETELY.

DATE: _____

PERSONAL INFORMATION

NAME: FIRST _____ MIDDLE: _____ LAST: _____

PRESENT ADDRESS: _____

ROAD OR STREET, CITY, STATE, ZIP CODE- INCLUDE APT OR BLDG # IF APPLICABLE

EMAIL: _____ PHONE: _____

Are you under 18 __YES__NO; Can you provide proof of your eligibility to work____YES__NO

Are you currently authorized to work in the United States? __YES__NO Proof of eligibility will be required if hired.

Position applied for: _____ Desired Wage: _____

Days/Hours Available to Work:

No Preference: _____ Monday: _____

Tuesday: _____ Wednesday: _____

Thursday: _____ Friday: _____

Saturday: _____ Sunday: _____

How many hours can you work weekly? _____ Are you available to work Holidays? __Y__N

Employment Desired FULL-TIME PART-TIME SEASONAL

When are you available to start work? _____

EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	# YRS COMPLETED	YR GRADUATED
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
Bus./Trade School	_____	_____	_____	_____
Professional Sch.	_____	_____	_____	_____

GENERAL

SPECIAL SKILLS AND ACTIVITIES: _____

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WORK HISTORY

DATE	NAME OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM: _____ TO: _____	_____	_____	_____	_____
FROM: _____ TO: _____	_____	_____	_____	_____
FROM: _____ TO: _____	_____	_____	_____	_____
FROM: _____ TO: _____	_____	_____	_____	_____

REFERENCES

Please list three character or professional references with contact numbers, and how long you have known them.

1 _____
2 _____
3 _____

I certify that all the information submitted by me on this application is true and complete. I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected, and if employed, I may be terminated at any time. In consideration of my employment, I agree to conform to the company's rules and regulations, and agree that my employment and compensation can be terminated with or without cause, and with or without notice, at any time, at either my or the company's discretion. I understand my employment is at will and can be terminated by myself or the company at any time. I also agree to have a full background check run on me as a prerequisite for employment.

Applicant Signature: _____ Date: _____

PLEASE DO NOT WRITE BELOW THIS LINE.

INTERVIEWED BY: _____ DATE: _____

REMARKS: _____

NEATNESS: _____ ABILITY: _____

HIRED: _____ YES _____ NO _____ POSITION: _____ SALARY _____

START DATE: _____