



# APPLICATION FOR EMPLOYMENT

(Equal Employment Opportunity Employer)



Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street City State Zip Code

Social Security No. \_\_\_\_\_ Date you can start: \_\_\_\_\_ Salary Required: \_\_\_\_\_

Who referred you? \_\_\_\_\_

List your addresses of residency for the past 3 years:

Current Address: \_\_\_\_\_  
Street City Phone How long? \_\_\_\_\_  
State Zip Code

Previous Addresses: \_\_\_\_\_  
Street City State/ Zip Code How long? \_\_\_\_\_  
Street City State/Zip Code How long? \_\_\_\_\_  
Street City State/ Zip Code How long? \_\_\_\_\_

Do you have the legal right to work in the United States?  Yes  No

Are you at least 18 years of age or older?  Yes  No

Have you worked for this Company before? \_\_\_\_\_ Where? \_\_\_\_\_

Dates: From: \_\_\_\_\_ To: \_\_\_\_\_ Rate of Pay: \_\_\_\_\_ Position: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Are you employed now?  Yes  No

May we contact your present employer?  Yes  No If yes, give name: \_\_\_\_\_

Can you perform the essential functions of the job(s) for which you are applying?  Yes  No

Are you available to work  FULL-TIME  PART-TIME  OVER-TIME

***This Company is an equal employment opportunity employer. All applicants will be considered without regard to race, color religion, sex, sexual orientation, gender identity, pregnancy, age, national origin, mental or physical disability, veteran's status, marital status, use of the workers' compensation system or other protected status in accordance with applicable federal and state equal employment opportunity laws.***

Have you pled guilty or been convicted of a felony?  Yes  No

If Yes, please provide the date and location of each conviction and a description of the offense:

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



## ***EXPERIENCE AND QUALIFICATIONS***

List any other experience that may help in your work for this Company: \_\_\_\_\_  
\_\_\_\_\_

List special courses or training other than shown elsewhere in this application: \_\_\_\_\_  
\_\_\_\_\_

List special equipment or technical materials you can work with other than those already shown: \_\_\_\_\_  
\_\_\_\_\_

## ***REFERENCES***

List 3 non-relatives who are familiar with your qualifications and actual work history and ability.

	<u>Name</u>	<u>Occupation/Relationship</u>	<u>Years Known</u>	<u>Telephone</u>
1.	_____	_____	_____	_____
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____

## ***TERMS OF EMPLOYMENT***

***Please Read the Following Statements Carefully Before Signing this Application. Only Those Applications That Are Signed and Dated Are Considered Valid. Acceptance of These Terms Is a Condition of Employment, and Any Applicant Not in Agreement with These Terms Should Not Seek a Position with this Company. If You Have Any Questions Regarding These Statements, Please Ask Them Before Signing this Application.***

I certify that all answers and statements I have made on this application (and resume or other supplementary materials) are true and complete without omissions. I understand that any false information will be grounds for refusal to hire or for immediate discharge if I am employed. I authorize each of the persons and organizations named in this application or provided by me as a reference to give you complete information and records regarding my employment, education, character and qualifications.

I understand that I may be offered employment conditioned upon me passing a urine test to detect drugs. I will be responsible for familiarizing myself with all rules and regulations of the Company as they presently exist or are later modified. *I recognize that my employment can be terminated, at the discretion of the Company or at my option, without notice, at any time, except as specifically set forth in writing in a current individual employment agreement signed by the Company President, or collective bargaining agreement.*

I also understand that no representative of the Company has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits, or terms and conditions of employment, except as specifically stated in a current individual written agreement signed by the Company President.

**I have read, understand and agree with the above.**

By: \_\_\_\_\_  
Signature of Applicant \_\_\_\_\_  
Date

This application is valid for only ninety (90) days from the date I signed. If I want to be considered for job openings more than ninety (90) days from date signed, I will submit a new application.