



APPLICATION FOR EMPLOYMENT

Position Desired: _____ Full Time Part Time Date _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER APPLICANT'S STATEMENT

I understand that if I am hired, my employment will be for no definite period, regardless of the period of payment of my wages. I further understand that I have the right to terminate my employment at will at any time with or without notice or reason, and the Company has the same right. No one other than the President of the Company has authority to modify this relationship or make any agreement to the contrary. Any such modification or agreement must be in writing.

I understand that the Company reserves the right to require me to submit to a drug test at any time and also reserves the right to require me to submit to an alcohol test and/or medical examination to the extent permitted by law. I further understand that the Company may contact my previous employers and I authorize those employers to disclose to the Company all records and other information pertinent to my employment with them. I release my previous employers from any liability as a result of their disclosure of information about me to the Company. I also authorize the Company to provide truthful information concerning my employment with it to my future prospective employers and I agree to hold it harmless for providing such information.

I further understand that if employed I will be on a 90-day introductory period, and that termination for unsatisfactory performance during that period will not result in any Company responsibility for unemployment benefits. I further understand that completion of the introductory period does not confer any expectation of continued employment, and that if employed, my employment will be for no definite period and "at-will."

By signing below, I certify that all of the information that I provide on this application and in any interview will be true, complete and accurate. I understand that if I am employed and such information is later found to be false or misleading in any respect, I will be dismissed.

I certify that I have received a written notification that the Company may obtain a consumer report or reports on me. I authorize this Company to obtain such a report or reports for use in connection with my application for employment and for other employment-related reasons. If hired, this authorization shall remain on file and serve as ongoing authorization for procurement of employment-related consumer reports at any time during my employment. I understand that the term "consumer report" includes, but is not limited to, credit checks, criminal background checks, department of motor vehicle reports, and investigative consumer reports. I further understand that the term "investigative consumer report" means a report in which information on my character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with my neighbors, friends, or associates, or with others with whom I am acquainted or who may have knowledge concerning any such items of information.

DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTAND THIS STATEMENT

_____ Date _____ Signature of Applicant

PERSONAL DATA

Name _____
(Print) Last First Middle

Social Security No. _____

Present Address _____
Street and Number City State Zip

How long have you lived there? _____
Years Months

Previous Address _____
Street and Number City State Zip

How long did you lived there? _____
Years Months

Telephone No. _____

Are you 18 years of age or older? Yes No

Have you ever worked for this Company before? Yes No

If Yes, please give dates and position: _____

Do you have any friends or relatives working here? Yes No

If Yes, Name: _____ Relationship: _____

Have you ever pled guilty or "no contest" to a crime, been convicted of a crime, had adjudication withheld, prosecution deferred or do you have any criminal charges pending? Yes No

If Yes, please give date and details of each: _____

Have you ever been a defendant in a civil suit or an intentional tort (assault, battery, false imprisonment, invasion of privacy, intentional infliction of emotional distress, intentional wrongful death)? Yes No

If Yes, provide details: _____

NOTE: Answering "Yes" to this question does not constitute an automatic bar to employment. Only those crimes which are substantially related to the position you are seeking will be considered.

RECORD OF PREVIOUS EMPLOYMENT

Please list the names of your present or previous employers in chronological order with present or last employer first. Be sure to account for all periods of time including ,military service and any period of unemployment. If self-employed, give firm name and supply business references.

Present or Past Employer _____ Address _____ City, State, Zip _____ Telephone _____	Employed From (mo/yr) _____ To (mo/yr) _____	Pay Start \$ _____ Final \$ _____	Your Title or Position _____ Name and Title of Last Supervisor _____	Reason for Leaving _____
Previous Employer _____ Address _____ City, State, Zip _____ Telephone _____	Employed From (mo/yr) _____ To (mo/yr) _____	Pay Start \$ _____ Final \$ _____	Your Title or Position _____ Name and Title of Last Supervisor _____	Reason for Leaving _____
Previous Employer _____ Address _____ City, State, Zip _____ Telephone _____	Employed From (mo/yr) _____ To (mo/yr) _____	Pay Start \$ _____ Final \$ _____	Your Title or Position _____ Name and Title of Last Supervisor _____	Reason for Leaving _____
Previous Employer _____ Address _____ City, State, Zip _____ Telephone _____	Employed From (mo/yr) _____ To (mo/yr) _____	Pay Start \$ _____ Final \$ _____	Your Title or Position _____ Name and Title of Last Supervisor _____	Reason for Leaving _____
Previous Employer _____ Address _____ City, State, Zip _____ Telephone _____	Employed From (mo/yr) _____ To (mo/yr) _____	Pay Start \$ _____ Final \$ _____	Your Title or Position _____ Name and Title of Last Supervisor _____	Reason for Leaving _____

List all other employers you have had in the last ten (10) years. _____

Have you ever been terminated or asked to resign from a job? Yes No If Yes, please explain circumstances: _____

Please explain fully any gaps in your employment history: _____

If you are presently employed may we contact your present employer? Yes No

PREVIOUS EXPERIENCE

Please describe any experience you have which you feel would assist you in performing the job for which you are applying.

EDUCATION

School Name	Years Completed: (Circle)	Diploma or Degree	Describe Course of Study or Major	Describe Specialized Training, Experience, Skills, and Extra-Curricular Activities
Elementary	4 5 6 7 8			
High School	9 10 11 12			
College / University	1 2 3 4			
Graduate / Professional	1 2 3 4			
Trade / Correspondence				
Other				

Are you a citizen of the United States or do you have the legal right to be employed in the United States? Yes No

Would you be willing and able to relocate? Yes No

Do you have the ability, with or without reasonable accommodations, to work overtime or to travel if travel and/or overtime are required by the job for which you are applying? Yes No

Position applied for _____ Salary desired _____

Date available to start _____

Have you ever applied with our company before? Yes No

How did you learn of our company and/or position? _____

Are you now, or do you expect to be, working in any other business or job? Yes No

Are there any days or hours you would be unable or unwilling to work? Yes No If yes, please specify _____

Would you be willing and able to perform all of the tasks required by the job you are applying for? Yes No

If Yes, explain _____

Have you filed any type of fraudulent claim against any of your present or past employers? Yes No

If Yes, explain _____

Will you abide by the safety rules of this company? Yes No

How many days of work (or school) have you missed in the last two years? _____

How many times have you been late for work (or school) in the last two years? _____

Would you be willing and able to report to work on time every day on a regular and consistent basis? Yes No

If you worked in any of your previous positions under another name, please give that name(s) _____

What languages do you speak? _____

PERSONAL REFERENCES

Please list persons who know you well -- not previous employers or relatives

Name	Occupation	Address (Street, City and State)	Telephone Number	Number of Years Known

DRIVING REFERENCES

Do you have a current driver's license? Yes No

State: _____ License No.: _____ Expiration Date: _____

Has your driver's license ever been suspended or revoked? Yes No

If yes, explain circumstances: _____

Do you have personal automobile insurance? Yes No Name of Insurance Company: _____

Has your personal automobile insurance even been cancelled? Yes No

If yes, explain circumstances: _____

Have you ever been cited for driving under the influence (DUI) or driving while intoxicated (DWI)? Yes No

If yes, explain circumstances: _____

Please list all moving traffic violations in the last five (5) years:

Offense	Date	Location	Offense	Date	Location

THIS APPLICATION WILL BE CONSIDERED ACTIVE FOR A MAXIMUM OF THIRTY (30) DAYS. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY.

I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE AND ACCURATE.

Date

Signature of Applicant

COMPANY USE ONLY:	
Interviewed by:	_____
Interviewer remarks:	_____
Is the operation of a company vehicle a job requirement?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes to above, has a request for driver's record been made?	<input type="checkbox"/> Yes <input type="checkbox"/> No