



Employment Application

We are an Equal Opportunity/Affirmative Action Employer

Please print in ink. You must complete the entire application.

Date: _____

Applicant Information			
Name (first, middle, last)			
Address (street, city, state, zip code)		Day Telephone	
Social Security Number		Evening Telephone	
Are there other names under which you have worked or attended school? ____Yes ____No If yes, please list for reference checking purposes.			
Are you at least 18 years old? ____Yes ____No If not, your employment will be subject to verification that you meet state/federal minimum age requirements for the type of work you are applying for and have obtained a valid work permit.			
Have you ever been convicted of a crime or pleaded no contest for any offense or violation other than minor traffic violations? ____Yes ____No If yes, explain 1) nature of the crime 2) date of conviction and 3) state in which convicted (Convictions are not an automatic bar to employment)			
Do you have any pending criminal charges against you? ____Yes ____No If yes, describe the 1) nature of the charges 2) date issued and 3) county and state where issued.			
Have you ever applied at this company before? ____Yes ____No		Have you ever worked at this company before? ____Yes ____No, If yes, reason for leaving_____	
Position Applying For	Part or Full Time Desired	Salary Preference	Shift Preference
When can you start?			
School Most Recently Attended			
Name		Location	Telephone
Last Grade Completed		Graduated? ____Yes ____No	Now enrolled? ____Yes ____No
Sports or activities:			
Two Most Recent Jobs (if not applicable, list US Military, voluntary work or personal reference)			
Company		Location	Telephone
Job Title		Supervisor	Dates worked: from _____ to _____
Wage		Reason for leaving	
Company		Location	Telephone
Job Title		Supervisor	Dates worked: from _____ to _____
Wage		Reason for leaving	
Special Skills			
If relevant, please describe word processing speed, software knowledge, and office equipment experience.			
If relevant, please describe experience using machines and equipment. (forklift, power tools, kitchen equipment, etc.)			
Are you aware of any reason that you cannot perform essential functions of the job with or without reasonable accommodations? ____Yes ____No Please Specify:			

This application is current for only 1 month (30 days). At the conclusion of which time, if you have not been offered employment and still wish to be considered for a position, it will be necessary for you to reapply.

I certify that the information contained in this application is correct to the best of my knowledge, and understand that falsification of the application in any detail is grounds for dismissal from employment in accordance with Company policy. I authorize and agree to cooperate in a thorough investigation of all statements made herein and other matters relating to my background and qualifications. I hereby release all persons and corporations requesting or supplying information from all liability or responsibility to me for doing so. I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at anytime with or without cause.

Signature

Date