



Employment Application

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Position Applied for	Desired Salary	Date Available	
Are you a citizen of the United States?	YES <input type="checkbox"/> NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/> NO <input type="checkbox"/>
Referred By	Are you 18 years of age or older?	YES <input type="checkbox"/> NO <input type="checkbox"/>	
Have you ever been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain			
EDUCATION			
High School		Location	
Years Completed	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>		
College		Location	
Last Year Completed	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>		Degree(s) Received/Subjects Studied
Other		Location	
Last Year Completed	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>		Degree(s) Received/Subjects Studied
GENERAL			
Job Related Skills (typing, driver's license, first aid/cpr, etc.)			
Subjects of Special Study/Activities other than Religious (civic, athletic, etc.):			
REFERENCES			
<i>Please list below three non-related personal references.</i>			
Name		Title/Relationship	
Address		Phone ()	
Name		Title/Relationship	
Company/Address		Phone ()	
Name		Title/Relationship	
Company/Address		Phone ()	

We are **equal opportunity employer, dedicated to a policy of non-discrimination in employment** on any basis including race, age, sex, religion, disability, sexual preference or national origin.

PREVIOUS EMPLOYMENT LIST BELOW YOUR LAST THREE EMPLOYERS, STARTING WITH MOST RECENT ONE FIRST.

Employer		Supervisor	
Address		Phone ()	
Job Title		Salary	\$
Responsibilities			
From	To	Reason for Leaving	
May we contact this supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Employer		Supervisor	
Address		Phone ()	
Job Title		Salary	\$
Responsibilities			
From	To	Reason for Leaving	
May we contact this supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Employer		Supervisor	
Address		Phone ()	
Job Title		Salary	\$
Responsibilities			
From	To	Reason for Leaving	
May we contact this supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

DISCLAIMER AND SIGNATURE

I authorize investigation on all statements contained in this application. I understand that misrepresentation of information requested is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without cause and without any previous notice.

Signature:	Date:
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DO NOT WRITE BELOW THIS LINE – OFFICE USE ONLY

Interviewed by/Date:

Remarks:

References Checked by/Date/Comments: