

WORK EXPERIENCE

Please account for all time for the last five (5) years. Include periods of unemployment and any prior employment by this Company. Begin with your most recent job. Use a separate sheet of paper if needed. DO NOT REFERENCE RESUME.

Present Employer	Address	From Mo/Yr	To Mo/Yr
Name and title of your supervisor	Phone Number	Starting Salary, Mo/Hrly?	
Your title and description of your duties:		Ending Salary, Mo/Hrly?	
		Reason for Leaving?	
Employer	Address	From Mo/Yr	To Mo/Yr
Name and title of your last supervisor	Phone Number	Starting Salary, Mo/Hrly?	
Your title and description of your duties:		Ending Salary, Mo/Hrly?	
		Reason for Leaving?	
Employer	Address	From Mo/Yr	To Mo/Yr
Name and title of your last supervisor	Phone Number	Starting Salary, Mo/Hrly?	
Your title and description of your duties:		Ending Salary, Mo/Hrly?	
		Reason for Leaving?	
Employer	Address	From Mo/Yr	To Mo/Yr
Name and title of your last supervisor	Phone Number	Starting Salary, Mo/Hrly?	
Your title and description of your duties:		Ending Salary, Mo/Hrly?	
		Reason for Leaving?	

REFERENCES

Please list two former supervisors and/or associates who are acquainted with your work performance.

Name	Organization	Area Code and Business Phone
Title	Home Address	City, State, Zip
Working Relationship		Area Code and Home Phone

Name	Organization	Area Code and Business Phone
Title	Home Address	City, State, Zip
Working Relationship		Area Code and Home Phone

GENERAL INFORMATION

Federal law prohibits the employment of unauthorized persons. Should you be hired, satisfactory proof of employment authorization and identity will be required within three (3) working days of hire. Failure to submit such proof within the required time will result in immediate dismissal.

	Yes	No	
If hired, can you furnish proof of citizenship or authorization to work?			
If you are under the age of 18 years old, do you have a work permit?			[] n/a
If required, would you be willing to work:	Shifts?		
	Weekends?		
	Holidays?		
Are you able to perform the essential functions of the job for which you are applying, with or without reasonable accommodations, in a safe or efficient manner?			
Have you ever been convicted of a felony in the past five (5) years? * If yes, explain on this form.			
Do you have any relatives or personal friends working for the Company?			
<i>If yes, who?</i>			
<i>Relationship:</i>			
Have you ever been refused a fidelity bond?			

*The existence of any conviction of any crime does not constitute an automatic bar to employment consideration. In the case of a marijuana conviction you need only disclose a felony conviction during the prior two (2) years.

MOTOR VEHICLE OPERATION

[] ***If this box has been checked, your job requires the operation of a motor vehicle. Complete the following:***

Do you have a driver's license? [] Yes [] No If yes, answer the following questions:		
What state issued your driver's license?	Driver's License Number:	Expiration Date:
Type or Class of License:	Is your driver's license valid? [] Yes [] No	
Have your driving privileges ever been suspended or revoked? [] Yes [] No		

SKILLS AND LICENSES

List all office, technical or professional skills and/or certificates, licenses and bilingual ability you possess that are relevant to the position for which you are applying. Be specific, for example, Typing 75 w.p.m., Key Entry, 80 w.p.m., Fluent in Spanish. If you have other skills you believe are important, list them.

MILITARY SERVICE

Were you a member of the military services? Yes No

If yes, please answer the following question. Have you obtained any special skills or abilities as a result of service in the military that would be applicable in the job for which you have applied? Yes No

If yes, please describe:

--

EDUCATION

SCHOOL	CITY AND STATE	# OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE				
COLLEGE				
TRADE / BUSINESS SCHOOL				
TRADE / BUSINESS SCHOOL				

Explanation for any section requiring further information:

PLEASE READ THIS SECTION BEFORE YOU SIGN THIS EMPLOYMENT APPLICATION FORM.

*I certify that answers given in this application are true and complete to the best of my knowledge. I understand that any false statements on this application could result in disqualification from the application process or if employed separation from the Company. I understand the employer is not obligated to offer the position to me, even after completing this application or following a job interview. I understand the Company has certain rules and procedures, which must be followed. I agree that if I am employed I will follow the rules of the Company or be subject to disciplinary action that could mean dismissal. I understand the Company is an at-will employer, which means that any term of employment is for no definite period of time regardless of the date or payment of wages. **If I am employed, such employment may be ended with or without cause or notice. No verbal agreements made during any application or interview process can be relied upon unless such agreements are in writing and signed by the owner or President of the Company including the at-will statement in this application.***

I understand if the Company hires me, my employment is conditional on my ability to provide proof of work authorization and identity as required by Federal Law and the completion of any post-employment requirements of the employer.

Your Signature: _____

Date of Application: _____