



# APPLICATION FOR EMPLOYMENT

## ARE YOU:

Are you at least 18 Years Old?  Yes  No

A Previous Applicant  Yes  No

A Previous Employee  Yes  No

Legally eligible to work in the U.S.?  
*(If offered employment, you will be required to provide proper documentation to verify eligibility.)*  Yes  No

Able to make it to work using a reliable means of transportation?  Yes  No

Do you have any relatives or friends who work for this Organization?  Yes  No

If yes, please provide names and where they work

---

---

---

## HOW DID YOU FIND US?

- |                          |                        |                            |       |
|--------------------------|------------------------|----------------------------|-------|
| <input type="checkbox"/> | Advertisement          | If so, Name of Publication | _____ |
| <input type="checkbox"/> | Referral from Employee | If so, Employee Name       | _____ |
| <input type="checkbox"/> | Employment Agency      | Name of Employment Agency  | _____ |
| <input type="checkbox"/> | Online Sites           | Name of Site               | _____ |
| <input type="checkbox"/> | Other _____            |                            |       |

**Are you able**, with or without reasonable accommodation, to perform the essential functions of this job? (If you have any questions about the functions of the job, please ask the interviewer before answering this question.)

Yes  No  If no, please explain.

---

---

**Describe** your current qualifications for the position, including education, skill, abilities, work habits, and work experience. (You may attach extra pages to answer.)

---

---

# APPLICATION FOR EMPLOYMENT

## YOUR WORK EXPERIENCE (complete for the past 10 years)

---

a. Present/Most Recent Employer    Type of Organization    \_\_\_\_\_    \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_    \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Start Date    End Date

---

Street Address/City/State/ZIP code    \_\_\_\_\_    \_\_\_\_\_  
Work Phone    \_\_\_\_\_    Hourly Rate/Salary    \_\_\_\_\_

---

Immediate Supervisor's Name    \_\_\_\_\_    \_\_\_\_\_  
Phone    \_\_\_\_\_    Email    \_\_\_\_\_

May we contact the supervisor?    Yes  No     What is/was your job title? \_\_\_\_\_

Summarize the nature of the work you performed and your job responsibilities.

---

Reason For Leaving

---

---

b. Previous Employer    Type of Organization    \_\_\_\_\_    \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_    \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Start Date    End Date

---

Street Address/City/State/ZIP code    \_\_\_\_\_    \_\_\_\_\_  
Work Phone    \_\_\_\_\_    Hourly Rate/Salary    \_\_\_\_\_

---

Immediate Supervisor's Name    \_\_\_\_\_    \_\_\_\_\_  
Phone    \_\_\_\_\_    Email    \_\_\_\_\_

May we contact the supervisor?    Yes  No     What is/was your job title? \_\_\_\_\_

Summarize the nature of the work you performed and your job responsibilities.

---

Reason For Leaving

---

---

c. Previous Employer    Type of Organization    \_\_\_\_\_    \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_    \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Start Date    End Date

---

Street Address/City/State/ZIP code    \_\_\_\_\_    \_\_\_\_\_  
Work Phone    \_\_\_\_\_    Hourly Rate/Salary    \_\_\_\_\_

---

Immediate Supervisor's Name    \_\_\_\_\_    \_\_\_\_\_  
Phone    \_\_\_\_\_    Email    \_\_\_\_\_

May we contact the supervisor?    Yes  No     What is/was your job title? \_\_\_\_\_

Summarize the nature of the work you performed and your job responsibilities.

---

Reason For Leaving

---

# APPLICATION FOR EMPLOYMENT

Have you ever been discharged or asked to resign from a job? Yes  No  If yes, please explain.

---

**PERSONAL REFERENCES: Give Three References (Neither Relatives or Employers)**

---

Name	Occupation	Employer	Years this person has known you
------	------------	----------	---------------------------------

---

Name	Occupation	Employer	Years this person has known you
------	------------	----------	---------------------------------

---

Name	Occupation	Employer	Years this person has known you
------	------------	----------	---------------------------------

**PROFESSIONAL INFORMATION (if applicable)**

<b>License Description</b>	<b>License Number</b>
Effective Date	Expiration
<b>Registry or Certification</b>	<b>Registration No.</b>
Effective Date	Expiration

**Other**

Type of School	Name and Location of School	Dates of Attendance	Name and Date of Degree Earned	Fields of Study (Major and Minor)
High School/ Trade School	Do you have a high school diploma or GED?  Yes <input type="checkbox"/> No <input type="checkbox"/>	<b>X</b>	<b>X</b>	<b>X</b>
Business or Tech School				
Colleges/Universities				
Sexual Harassment Training				
Other Training (Explain)				

# APPLICATION FOR EMPLOYMENT

# APPLICATION FOR EMPLOYMENT

## ACADEMIC OR OTHER AWARDS OR ACHIEVEMENTS

(Academic honors, awards, scholarships/fellowships, membership in academic societies or other awards obtained related to your education or qualifications for the position\*)

\*Exclude those that would indicate race, color, religion, national origin, gender, disability, age, or other protected class status.

Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Description \_\_\_\_\_

Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Description \_\_\_\_\_

## ADDITIONAL QUALIFICATIONS

(Ex. special technical, computer, or individual skills that would qualify you for the position)

Description \_\_\_\_\_

Description \_\_\_\_\_

Description \_\_\_\_\_

Description \_\_\_\_\_

## U.S. MILITARY SERVICE

Branch \_\_\_\_\_ Rank at Discharge \_\_\_\_\_ Dates of service \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_ to \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_

\_\_\_\_\_ Honorable Discharge?  Yes  No  
Duties \_\_\_\_\_

# APPLICATION FOR EMPLOYMENT

## Please Read Carefully

**If you have any questions regarding the application, this statement, or if you need special assistance in regard to applying for this position, please ask the person who is assisting you with this application.**

As an equal opportunity employer, this Organization will strive to conduct all personnel practices and procedures, including recruitment, selection, employment, compensation, benefits, evaluations, promotions, demotions, assignments, transfers, reductions-in-force, terminations, training, education, recreational and social activities, and safety and health programs, without regard to race, color, religion, gender, national origin, age, disability, veteran status, or any other status protected under local, state or federal laws.

The answers to the questions on this application are not intended for use for discriminatory purposes.

Your application will be given the consideration it deserves; however, our acceptance of your completed application for our consideration does not mean you will be offered employment. By signing your name below, you indicate your understanding that nothing contained in this application or any information gained or discussed during the interview process creates an employment contract between you and this Organization. **If hired, you will be, at all times, an at-will employee.** Should this application and the hiring process result in your employment, you have the right to terminate your employment at any time and for any reason. Likewise, this Organization reserves the right to terminate your employment at any time and for any reason not prohibited by law.

Moreover, you understand no representative of this Organization, with the exception of the chief executive, has any authority to enter into any agreement of any kind or form with you for any specified period of time or to guarantee any other terms of employment, including benefits. **No statements, written or verbal, made to you at any time prior to, or during, employment are intended to alter your at-will status.**

When processing this application, and if applicable to the position for which you are applying, Organization may request third parties perform criminal, police, credit, or other background checks about you. Should this be necessary, you will be given separate forms to fill out authorizing any such checks and setting forth information about your rights. In addition to these background checks, Organization may directly contact past employers, supervisors, and/or any other person listed in this application regarding the statements you make during the application process and your suitability for employment. This inquiry may include information as to your general character, reputation, and work-related characteristics.

Also, note that should the Organization hire you, the Organization may use, at any time during your employment, outside agents or representatives to perform investigations surrounding any claim of wrongdoing, including, but not limited to, sexual harassment, theft, or fraud.

I certify with my signature below I have given the Organization true and complete information on this application to the best of my knowledge. I have omitted no facts called for on the application and have not made any false statements. No requested information has been concealed. I authorize the Organization to verify the accuracy of the statements and obtain reference information on my work performance. I release Organization from all liability of any kind, which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, any false statements or omissions of fact called for on this application could result in dismissal. I understand that should an employment offer be extended to me and accepted, I will at all times be an at will employee. I will fully adhere to the policies, rules, and regulations of employment. However, I further understand that neither Organization's policies, rules, regulations, nor anything said during the interview process, shall be deemed to alter the at-will nature of my employment or to constitute the terms of an implied employment contract.

Date \_\_\_\_/\_\_\_\_/\_\_\_\_ Signature of Applicant: \_\_\_\_\_

Applicant's name, printed \_\_\_\_\_

**This application for employment expires 60 days after the date indicated next to your signature.  
Consideration for employment after 60 days requires a new application.**

# APPLICATION FOR EMPLOYMENT

## Internal Office Use

### References

Date            /        /                    Organization \_\_\_\_\_                    Contact \_\_\_\_\_

Information Obtained or Verified \_\_\_\_\_

Date            /        /                    Organization \_\_\_\_\_                    Contact \_\_\_\_\_

Information Obtained or Verified \_\_\_\_\_

Date            /        /                    Organization \_\_\_\_\_                    Contact \_\_\_\_\_

Information Obtained or Verified \_\_\_\_\_

Date            /        /                    Organization \_\_\_\_\_                    Contact \_\_\_\_\_

Information Obtained or Verified \_\_\_\_\_

**Background Check Performed?**     Yes     No

Which one(s)? Add 2 lines

**Eligible for Hire?**     Yes     No

Position Title \_\_\_\_\_                    Location \_\_\_\_\_

Combine Starting Date \_\_\_\_\_

Combine Hiring Rate \_\_\_\_\_                    Level \_\_\_\_\_                    Step: \_\_\_\_\_