

Employment Application

ALL EMPLOYMENT OFFERS ARE SUBJECT TO
SUCCESSFUL RESULTS FOR ALL OF THE FOLLOWING:

DRUG SCREEN
BACKGROUND CHECK
PERSONALITY PROFILE
I-9 VERIFICATION

(Please **CLEARLY** print all except for your signature; unreadable applications **WILL NOT** be processed)

APPLICANT INFORMATION											
Last Name				First				M.I.		Date	
Street Address								Apartment/Unit #			
City				State				ZIP			
Phone		E-mail Address									
Date Available		Social Security No.		Desired Salary							
Position Applied for											
<i>(Do not answer this question unless you have been informed of the requirements of this position)</i> Are you capable of performing the essential functions of this position as they have been outlined to you? If no, Please explain:								YES <input type="checkbox"/>		NO <input type="checkbox"/>	
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"/>	
Are you 18 years of age or older? (proof may be required by employer)		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Are you employed now?		YES <input type="checkbox"/>		NO <input type="checkbox"/>	
Have you ever worked for this company before?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?					
Are you willing to work overtime if requested?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Current Driver's License # (if required for position)		State	Commercial YES <input type="checkbox"/> NO <input type="checkbox"/>		
Have you ever been convicted of a felony or a misdemeanor?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, explain					
EDUCATION											
High School		Address									
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
College		Address									
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
Other		Address									
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
REFERENCES											
<i>Please list three professional references.</i>											
Full Name				Relationship							
Company				Phone		()					
Address											
Full Name				Relationship							
Company				Phone		()					
Address											
Full Name				Relationship							
Company				Phone		()					
Address											

PREVIOUS EMPLOYMENT										
Company					Phone	()				
Address					Supervisor					
Job Title				Starting Salary	\$			Ending Salary	\$	
Responsibilities										
From		To		Reason for Leaving						
May we contact your previous supervisor for a reference?				YES	<input type="checkbox"/>	NO	<input type="checkbox"/>			
Company					Phone	()				
Address					Supervisor					
Job Title				Starting Salary	\$			Ending Salary	\$	
Responsibilities										
From		To		Reason for Leaving						
May we contact your previous supervisor for a reference?				YES	<input type="checkbox"/>	NO	<input type="checkbox"/>			
Company					Phone	()				
Address					Supervisor					
Job Title				Starting Salary	\$			Ending Salary	\$	
Responsibilities										
From		To		Reason for Leaving						
May we contact your previous supervisor for a reference?				YES	<input type="checkbox"/>	NO	<input type="checkbox"/>			
In case of emergency notify:	Name				Address				Phone	
MILITARY SERVICE										
Branch					From		To			
Rank at Discharge					Type of Discharge					
If other than honorable, explain										
DISCLAIMER AND SIGNATURE										
<p>I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.</p> <p>I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liabilities from any damage that may result from furnishing same to you.</p> <p>I understand and agree that, if hired, my employment will be "at will", without any definite period of time, and may be terminated at any time, with or without cause and with or without prior notice, regardless of the date of payment of my wages or salary.</p> <p>I understand that as a condition of employment, I may be required to undergo a medical examination and drug and alcohol testing at the company's expense.</p>										
Signature							Date			