



## EMPLOYMENT APPLICATION

### GENERAL INFORMATION

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M. Initial \_\_\_\_\_ Social Security # \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Position Applying For \_\_\_\_\_ Starting Date Available \_\_\_\_\_ Desired Salary \_\_\_\_\_

Hours Available:  Full Time  Part Time  Temporary  Permanent

Monday: \_\_\_\_\_ Tuesday: \_\_\_\_\_ Wednesday: \_\_\_\_\_  
Thursday: \_\_\_\_\_ Friday: \_\_\_\_\_ Saturday: \_\_\_\_\_

If You Are Currently A Student, Please Provide Class / Activity Schedule:

Are you able to perform the essential job functions of the position you are applying for with or without reasonable accommodations? <input type="checkbox"/> YES <input type="checkbox"/> NO	If hired, will you be able to work overtime? <input type="checkbox"/> YES <input type="checkbox"/> NO
Are you at least 18 years old? <input type="checkbox"/> YES <input type="checkbox"/> NO	If under 18, do you have a work permit? <input type="checkbox"/> YES <input type="checkbox"/> NO

Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by court? A yes response does not automatically disqualify your application. If yes, please explain.  YES  NO

### EDUCATION INFORMATION

<u>School</u>	<u>Area of Study</u>	<u>Degree / Certificate Earned</u>
_____	_____	_____
_____	_____	_____

Other special knowledge, skills, or qualifications (list any construction, manufacturing, office, or technical skills)

Military Service (list dates, ranks, training)



**EMPLOYMENT HISTORY**

List all employers, starting with most recent. All information must be complete. You may attach a resume, but not in place of completing required information.

Employer #1                                      Employer Address                                      Supervisors Name                                      Phone

Dates Employed                                      Job Title                                      Salary                                      May We Contact?

Duties & Responsibilities

Reason for Leaving

Employer #2                                      Employer Address                                      Supervisors Name                                      Phone

Dates Employed                                      Job Title                                      Salary                                      May We Contact?

Duties & Responsibilities

Reason for Leaving

Employer #3                                      Employer Address                                      Supervisors Name                                      Phone

Dates Employed                                      Job Title                                      Salary                                      May We Contact?

Duties & Responsibilities

Reason for Leaving



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**OTHER INFORMATION**

Volunteer Activities

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Hobbies / Interests

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**CERTIFICATION & AUTHORIZATION**

The above information is true and correct. I authorize the company to inquire into my education, past employment history, and references as needed to research my qualifications for this position. If employed, I will be required to provide original documents which may verify my identity and right to work in the United States under Immigration Reform and Control Act (IRCA) of 1986. The documents provided will be used for the completion of Form I-9. I hereby acknowledge that I have read and agree to the above statements.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date