



APPLICATION FOR EMPLOYMENT

Qualified applicants are considered for all positions without regard to race, color, religion, sex (including pregnancy), national origin, age, veteran status, gender, marital status, sexual orientation, physical or mental disability, genetics or gender identity.

PLEASE COMPLETE THE FOLLOWING INFORMATION:

Date of Application	Position(s) Applied for
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Referral Source Advertisement Friend Relative Employment Agency _____
 Other _____

Name			
Address	City	State	Zip Code
Phone - Daytime		Phone - Evening	

Have you ever been employed here before? Yes No Date _____

Are you legally eligible for employment in this country? Yes No

Are you employed now? Yes No May we contact your present employer? Yes No

Are you available to work: Full time Part Time AM Hours _____ PM Hours _____
 Temporary (Specify Dates) _____

Do any of your friends or relatives work here? Yes No

If Yes, List Names _____

Can you (either with or without an accommodation) perform the essential functions of the position(s) you are applying for?

Date Available _____ Salary Desired _____

AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER M/F/V/H

SKILLS

Please check the work at which you are skilled:

Typing _____WPM	Adding Machine or Calculator	By Touch			
Shorthand _____WPM	Dictaphone				
PBX _____Type	Filing	Numeric	Chronological		
Data Entry	Excel	Outlook	Access	MS Dynamics	MRP
Other _____					

Summarize skills and qualifications acquired from employment or other experience.

Describe specialized training, apprenticeship skills and extracurricular activities.

List professional trade, business, or civic activities and offices held. (Exclude groups that indicate race, color, religion, sex, or national origin)

List any honors/awards you have received.

State any additional information you feel may be helpful to us in considering your application.

Give name, daytime phone number and email of three references not related to you but for whom you have worked. Please specify the company name and in what capacity you worked together.



CURRENT OR MOST RECENT EXPERIENCE

(A resume may also be attached, but this section must be completed in full.)

List each job held. Start with present or last job. Include military service assignments and volunteer activities (exclude groups that indicate race, color, religion, sex, or national origin).

Employer			Phone		
Address		City		State	Zip
Start Date	Starting Salary		Starting Position		
Date Left	Last Salary		Last Position		
Name and Title of Supervisor					
Description of Duties					

Employer			Phone		
Address		City		State	Zip
Start Date	Starting Salary		Starting Position		
Date Left	Last Salary		Last Position		
Name and Title of Supervisor					
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Employer			Phone		
Address		City		State	Zip
Start Date	Starting Salary		Starting Position		
Date Left	Last Salary		Last Position		
Name and Title of Supervisor					
Description of Duties					



EDUCATION

High School Name		City	State
Years Completed	Did You Graduate?	Diploma/Degree	Date Completed

College/University Name		City	State
Years Completed	Did You Graduate?	Diploma/Degree	Date Completed
Describe Course of Study			

Graduate/Professional School Name		City	State
Years Completed	Did You Graduate?	Diploma/Degree	Date Completed
Describe Course of Study			

AGREEMENT

I certify that the answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I authorize all former employers and persons mentioned in my application to disclose information about my previous employment and education and I release all such persons from all liability for any damage that may result from furnishing such information.

I understand that I am an at will employee and that my employment may be terminated at any time, with or without cause and with or without notice in the sole discretion of the company.

I understand the company benefits, rules, and regulations may be changed, modified, deleted or added to by the company at any time at the company's sole option. Unless otherwise stated, all changes are prospective only and are immediately effective upon the approval by the president or his designee.

I understand that no representative of the company has any authority to enter into any agreement for employment for any specified period of time or to make commitments or promises or assure any benefit terms and conditions of employment unless such are made in writing and signed by the president of the company including any revisions or modifications thereto.

In the event of employment, I understand that omissions, or false, or misleading information given in my application or interviews may result in discipline up to and including termination. I understand and agree that I will comply with all of the company's policies, practices, and procedures.

Signature of Applicant	Date
Printed Name of Applicant	Date

