

EMPLOYMENT APPLICATION

Please Print

Name _____ Date _____
Last First Middle

Address _____

Telephone _____ / Cell Phone _____

Position applying for _____

Type of employment desired (circle one): Full-Time Part-Time Temporary Seasonal

On what date would you be available for work? _____

Referral source (circle one): Advertisement Employee Relative Employment Agency Walk-in

Are you employed now? _____ If yes, may we contact your present employer? _____

Have you filed an application here before? _____ If yes, give dates _____

Have you ever been employed here before? _____ If yes, give dates _____

Are you 18 year of age or older? yes no

Are you legally eligible for employment in this country: yes no
(Proof of U.S. citizenship or immigration status will be required upon employment.)

EDUCATIONAL RECORD

High School(s) or last grade completed:

Name & Address of School: _____

Number of Years Completed: _____ Diploma: _____

College(s) or Technical School(s):

Name & Address of School _____

Courses of Study: _____

Number of years completed: _____ Degree/Diploma: _____

Other Schooling or Training:

Name & Address of School: _____

Courses of Study: _____

Number of years completed: _____ Degree/Diploma: _____

Name & Address of School: _____

Courses of Study: _____

Number of years completed: _____ Degree/Diploma: _____

RECORD OF EMPLOYMENT: (List positions starting with most recent)

Employer: _____ Phone: _____

Address: _____

Position Title: _____ Supervisor: _____

Start Date _____ Date Left _____ Beginning Pay Rate _____ Ending Pay Rate _____

Duties _____

Reason for Leaving _____

Employer: _____ Phone: _____

Address: _____

Position Title: _____ Supervisor: _____

Start Date _____ Date Left _____ Beginning Pay Rate _____ Ending Pay Rate _____

Duties _____

Reason for Leaving _____

Employer: _____ Phone: _____

Address: _____

Position Title: _____ Supervisor: _____

Start Date _____ Date Left _____ Beginning Pay Rate _____ Ending Pay Rate _____

Duties _____

Reason for Leaving _____

Additional Employers:

_____ to _____
Employer Dates Employed City/State Telephone

_____ to _____
Employer Dates Employed City/State Telephone

Summarize Special Skills and Qualifications Acquired from Employment or Other Experience

REFERENCES (Do not include employers or relatives)

Name

Occupation

Contact Information

1. _____
2. _____
3. _____

CERTIFICATION AND AGREEMENT

I certify that all information contained in this application is true and correct. I understand and agree that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed. I understand that my employment is at-will, meaning that I or the company may terminate my employment at any time, with or without cause and without prior notice.

I give the employer the right to investigate all references, verify all data given on this application or during interviews, and to secure additional information about me if job related. I hereby release from any liability the employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The employer is an equal opportunity employer. No question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on a basis prohibited by local, state or federal law.

Signature of Applicant

Date

FOR OFFICE USE ONLY

Date of Hire _____ Position _____

Plant # _____ Starting Rate of Pay _____

Completed by _____