



EMPLOYMENT APPLICATION

Thank you for choosing our organization as a place where you would like to work. We have very high standards applicants must meet before they can become employees of our organization. Our present employees are a very vital part of our organization and have been selected by these same high standards.

Our organization is an equal opportunity employer providing the same employment opportunities to all applicants regardless of race, color, age, religion, sex, marital status, national origin, mental or physical handicap/disability, or veteran status.

By applying for employment with our organization, you agree to comply with the policies of the organization, if hired, and you specifically agree to the following provisions as confirmed by your signature below.

You provide the right to the organization to conduct a full and thorough investigation into your back- ground relative to previous employment, medical history, personal history, and any further information deemed relevant by the organization.

You provide full release to previous employers, physicians and medical treatment facilities, personal references, and other sources of information deemed relevant by the organization to fully disclose requested information about you.

Any misrepresentations of or omissions of relevant facts as so deemed by the organization in this application will disqualify you and will result in your discharge, if hired, upon discovery.

You agree to the organization's policy of physical examinations and of substance abuse and that failure to satisfy these policies will result in your disqualification or discharge and that being accepted for employment and subsequent continued employment is dependent upon your physical and mental ability to perform the essential functions of the assigned position with or without reasonable accommodation.

If hired, the organization has the right to terminate you at any time and you have the right to resign at any time.

This employment application is considered active for ninety (90) days following the date of completion of the application.

I have read, understand and agree to the above.

Application Date

Position(s) Applying For

Referred By

PERSONAL INFORMATION

Full Name: _____
Last First Middle Nickname(optional)

Address: _____
Street City State ZIP

Phone: Home _____ Work _____ Cell _____

Are you 18 Years of over? Yes ____ No ____

Driver's License Number: _____ State: _____

Have you applied with us before? ____ If yes, when? _____

Have you worked here before? ____ If yes, when? _____

If you worked here before, who was your supervisor? _____

Can you confirm you are legally eligible for employment in the U.S. by presenting a valid Drivers License, Social Security Card, Birth Certificate or INS document? _____

What qualities do you have which you feel would be a welcome addition to our organization?

Relatives or friends who work here: _____

Have you ever been convicted of a felony or released from prison within the last 5 years? ____
If yes, please explain in details the offense:

Date you can begin work: _____ Starting pay required: _____

Are you on lay-off? ____ If yes, from where? _____

Can you work: Any shift? ____ Overtime? ____ Weekends _____

EDUCATIONAL BACKGROUND

Provide the requested information for each of the following:

School Name, Years Completed, Major/Degree (if applicable)

Grade School: _____

High School: _____

College: _____

Graduate School: _____

Specialized Education: _____

List any seminars, workshop, training courses, etc. that you have attended which would help quality for employment in our organization:

WORKPLACE REFERENCES

List 3 individuals you have worked with/for that are not related to you

Name	Phone	Company	Occupation
1. _____			
2. _____			
3. _____			

PERSONAL REFERENCES

List 3 individuals not related to you

Name	Phone	Occupation	Years Known
1. _____			
2. _____			
3. _____			

EMPLOYMENT HISTORY

Please provide the requested information on your last four (4) employers, beginning with your present or most recent employer. Please complete even if resume is presented.

1. Employer: _____ Address: _____

Employed from: _____ to: _____ Last pay rate: _____

Why did you leave, or why do you want to leave? _____

What did/do you like most about your job? _____

What did/do you like least about your job? _____

2. Employer: _____ Address: _____

Employed from: _____ to: _____ Last pay rate: _____

Why did you leave, or why do you want to leave? _____

What did/do you like most about your job? _____

What did/do you like least about your job? _____

3. Employer: _____ Address: _____

Employed from: _____ to: _____ Last pay rate: _____

Why did you leave, or why do you want to leave? _____

What did/do you like most about your job? _____

What did/do you like least about your job? _____

4. Employer: _____ Address: _____

Employed from: _____ to: _____ Last pay rate: _____

Why did you leave, or why do you want to leave? _____

What did/do you like most about your job? _____

What did/do you like least about your job? _____

THANK YOU AGAIN FOR APPLYING WITH OUR ORGANIZATION