



**Employment Application**

Date: \_\_\_\_\_

**Applicant Information**

\_\_\_\_\_  
Last Name First Name M.I.

\_\_\_\_\_  
Street Address Apartment/Unit #

\_\_\_\_\_  
City State ZIP Code

Home Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

How long have you lived at your present address? \_\_\_\_\_  Years  Months

Are you a citizen of the United States or authorized to work in the U.S?  YES  NO

Have you ever been bonded?  YES  NO If yes, where: \_\_\_\_\_

Is there any reason to believe you could not be bonded?  YES  NO If yes, please explain: \_\_\_\_\_

Have you ever been convicted of a crime, excluding misdemeanors and summary offences, in the past ten years which has not been annulled or expunged or sealed by a court? YES NO  
   
If yes, please explain fully.

Have you ever worked or attended school under another name? YES NO If yes, what name: \_\_\_\_\_

**Position Desired**

Position: \_\_\_\_\_  Part-time  Full-time Date Available: \_\_\_\_\_

Desired Salary: \$ \_\_\_\_\_  Per Hour  Monthly  Annually

Have we ever employed you previously? YES NO If yes, when: \_\_\_\_\_

Is anybody in your immediate family employed by us? YES NO If yes, who? \_\_\_\_\_

Did anybody refer you to us? YES NO If yes, who? \_\_\_\_\_

**Education**

School Name	Did you graduate? YES NO	Degree Received	Major course of study
High School: _____ :	<input type="checkbox"/> YES <input type="checkbox"/> NO	_____	_____
College: _____ :	<input type="checkbox"/> YES <input type="checkbox"/> NO	_____	_____
Other: _____ :	<input type="checkbox"/> YES <input type="checkbox"/> NO	_____	_____
Are you currently pursuing further studies?	<input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, please explain _____	

**Previous Employment**

List your present and past employment for ten years, beginning with your most recent. Attach additional sheets if necessary.

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  NO

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  NO

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  NO

### Military Service

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

### References

*Please list three professional references.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

### Authorization and Acknowledgements

I affirm that the information I have provided in this application is true to the best of my knowledge, information, and belief, and I have not knowingly withheld any information requested. I understand that withholding or misstating any information requested in this application is grounds for rejection of my application, and that providing false or misleading information in this application is grounds for discharge.

I authorize the company to verify my references, record of employment, education record, and any other information I have provided. Unless otherwise noted, I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release the company, my former employers and all other persons and entities, from any and all claims, demands, or liabilities arising out of or in any way related to such inquiry or disclosure.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_