

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(Please Print)

Position(s) applied for	Date of Application
How did you learn about us?	
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative
<input type="checkbox"/> Other: _____	
<input type="checkbox"/> Walk-in	

Last Name	First Name	Middle Initial
Address	City, State	Zip Code
Telephone Number (s)		Social Security Number

If under 18 years of age, can you provide proof of eligibility to work? Yes No

Have you ever filed an application with us before? Yes No
 If yes, give date: _____

Have you ever been employed with us before? Yes No
 If yes, give date(s): _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status? Yes No
Proof of citizenship or immigration status will be required upon employment.

On what date would you be available for work? _____

Are you available to work: Full-time Part-time Shift work Temporary

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Have you ever been convicted of a felony? Yes No
Conviction will not necessarily disqualify an applicant from employment.

If yes, please explain: _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

EDUCATION

	Name & Address Of School	Course of Study	Years Completed	Diploma/Degree
Elementary				
High School				
Undergraduate				
Graduate/ Professional				
Other (specify)				

Indicate any foreign languages you can speak, read and/or write:

	Fluent	Good	Fair
SPEAK			
READ			
WRITE			

Describe any specialized training, apprenticeship, skills, and extra-curricular activities

Describe any job-related training received in the United States military

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities, or other protected status. (If you need additional space, please continue on a separate sheet of paper).

Employer	Dates Employed:	Job Title/Work Performed:
Address	From To	
Telephone Number(s)	Hourly Rate/Salary:	
Supervisor	Starting Final	
Reason for leaving		

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Supervisor	Starting Final	
Reason for leaving		

List Professional, Trade, business or civic activities and offices held.

You may exclude memberships that would reveal gender, race, religion, national origin, age, ancestry, disability, or other protected status.

Additional Information

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience

Specialized Skills (Check skills)

- | | | | |
|---------------------------------------|---|------------|--------|
| <input type="checkbox"/> eMail | <input type="checkbox"/> Microsoft Visio | VoIP | HTML |
| <input type="checkbox"/> Web browsing | <input type="checkbox"/> Microsoft Access | ColdFusion | VB |
| <input type="checkbox"/> Typing | <input type="checkbox"/> Microsoft Excel | Oracle | XML |
| <input type="checkbox"/> Windows 2000 | Microsoft Project | Linux | Other: |

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

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached.

Yes

No

REFERENCES

1. Name:	Phone #
Address:	
2. Name:	Phone #
Address:	
3. Name	Phone #
Address:	

Applicant's Statement

I certify that 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.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Remarks: _____			
Interviewer		Date	
Employed	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date of employment: _____
Job Title: _____	Department: _____	Hourly Rate/Salary: _____	
By: _____			
Name and Title		Date	

NOTES
