

Application for Employment

Please Print

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for

Date of application

Name

Applicant ID #

Last First Middle

Address

Street City State Zip Code

Telephone

Cellular/Other #

E-mail Address

Referral Source (How did you hear about us?)

If you are under 18 and it is required, can you furnish a work permit? Yes No

If no, please explain:

Have you ever been employed here before? If yes, give dates and positions: Yes No

Is this application a request for reemployment following an extended military leave of absence from this company? Yes No
 If yes, additional information may be requested.

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

Date available for work What is your desired salary range \$

Type of employment desired: Full-Time Part-Time Temporary Seasonal Educational Co-Op

Are you able to perform the "essential functions" of the job for which you are applying (with or without reasonable accommodation)?

This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law.

Yes No Need more information about the job's "essential functions" to respond

Driver's license number required if driving may be required in the job for which you are applying: _____ State _____

Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever pleaded "guilty" or "no contest" to, or been convicted of, a crime? Yes No

If yes, please provide date(s) and details:

Have you ever been a defendant in a civil action for an intentional tort (e.g., a civil charge for assault, battery, intentional infliction of emotional distress, false imprisonment, wrongful death, etc.)? Yes No

If yes, please provide nature of the tort and disposition of the matter (how it was resolved):

Employment History

Starting with your most recent employer, provide the following information.

Employer	Telephone #	Dates employed:	to
Street Address	City	State	
Starting job title/final job title	<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per Commission/Bonus/Other Compensation \$ _____		
Immediate supervisor and title (for most recent position hel	<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per Commission/Bonus/Other Compensation \$ _____		
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later E-mail:			
Why did you leave?			
Summarize the type of work performed and job responsibility			

Employer	Telephone #	Dates employed:	to
Street Address	City	State	
Starting job title/final job title	<input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ per Commission/Bonus/Other Compensation \$ _____		
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May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later E-mail:			
Why did you leave?			
Summarize the type of work performed and job responsibility			

Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying:

Computer Skills (Check appropriate boxes. Include software titles and years of experience.)

<input type="checkbox"/> Word Processing _____	Years: _____	<input type="checkbox"/> E-mail _____	Years: _____
<input type="checkbox"/> Spreadsheet _____	Years: _____	<input type="checkbox"/> Internet _____	Years: _____
<input type="checkbox"/> Presentation _____	Years: _____	<input type="checkbox"/> Other _____	Years: _____

Educational Background

Starting with your most recent school attended, provide the following information.

School (include City & State)	Years Completed	Completed	GPA Class Rank	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> Degree <input type="checkbox"/> Certificate <input type="checkbox"/> Other	<input type="checkbox"/> GED	
		<input type="checkbox"/> Diploma <input type="checkbox"/> Degree <input type="checkbox"/> Certificate <input type="checkbox"/> Other	<input type="checkbox"/> GED	
		<input type="checkbox"/> Diploma <input type="checkbox"/> Degree <input type="checkbox"/> Certificate <input type="checkbox"/> Other	<input type="checkbox"/> GED	

References

List names and telephone numbers of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are *not* related to you.

Name	Title	Relationship to You	Telephone	Email	# of Years Known

Social Security Number

SS# _____ We will use this information only for employment purposes and make reasonable efforts to safeguard your privacy

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct. I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president. I understand that if I am blind, my employment will be subject to a probationary period, which ordinarily will not exceed 90 days from the date I am hired. If I am discharged at any time during the probationary period for unsatisfactory performance, I understand that this employer will not be charged for any employment benefits that may be paid to me for work I performed during the probationary period.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

This Company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for the employment for employment on the basis of his or her sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status. The Company takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____

Date