



Applications are considered for all possible positions without regards to race, color, religion, sex, national origin, age marital or veteran status or the presence of non-related medical condition or disability.

Name: _____ Date: _____ Phone # _____

Address: _____ City: _____ State: _____ Zip: _____

Are you legally able to work in the United States: () Yes or () No Wage Expectations: _____

Have you ever been convicted of a felony or misdemeanor? () Yes or () No

(Conviction may not exclude you from qualifying for a position)

Please list convictions and provide any explanation you see fit: _____

Position or Positions: _____ Currently Employed: () Yes or () No Desired Start Date: _____

Desired Shift: () 1st () 2nd () 3rd Desired start and end time: _____ () Full Time () Part Time

Desired days: () Monday, () Tuesday, () Wednesday, () Thursday, () Friday, () Saturday, () Sunday

Most recent or current Employer: _____ Employment Dates: _____

Address: _____ City: _____ State: _____ Zip: _____

Job Title: _____ Supervisor's Name; _____ Phone #: _____

Reason for Leaving: _____ Wage/Salary: _____

Employer # 2: _____ Employment Dates: _____

Address: _____ City: _____ State: _____ Zip: _____

Job Title: _____ Supervisor's Name; _____ Phone #: _____

Reason for Leaving: _____ Wage/Salary: _____

Employer # 3: _____ Employment Dates: _____

Address: _____ City: _____ State: _____ Zip: _____

Job Title: _____ Supervisor's Name; _____ Phone #: _____

Reason for Leaving: _____ Wage/Salary: _____



High School: _____ **City:** _____ **State:** _____ **Graduated:** () Yes or () No

Junior College: _____ **City:** _____ **State:** _____ **Graduated:** () Yes or () No

College/University: _____ **City:** _____ **State:** _____ **Graduated:** () Yes or () No

Other Training: _____

Certifications or licenses: _____

Office Equipment: _____

Supervisory Experience: _____

Please list at least 2 work related references. These can be supervisors, business owners or co-workers.

Name of Reference #1: _____ **Business name if applicable :** _____

Phone #: _____ **Relationship to applicant:** _____ **Years known:** _____

Name of Reference #2: _____ **Business name if applicable :** _____

Phone #: _____ **Relationship to applicant:** _____ **Years known:** _____

Name of Reference #3: _____ **Business name if applicable :** _____

Phone #: _____ **Relationship to applicant:** _____ **Years known:** _____

As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references. If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the United States, have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms. I understand and agree to the information listed above.

Signature of applicant

Date Signed

