

## **Employment Application**

Please Print Date: Name: Last First Middle Home Phone \_\_\_\_\_ Mobile Phone\_\_\_ Permanent Address:\_\_\_ Street City State Nο Zip **Employment Desired:** Position applying for:\_\_\_ Are you apply for: Regular full-time employment? Yes No Part-time employment? Yes No Temporary Employment? Yes No What days and hours are you available to work? \_\_ If applying for temporary work, during what period of time will you be available? Are you available weekends? Yes No If hired, on what date can you start? \_\_\_\_\_ Salary desired;\_ **Personal Information:** Why are you applying for work with us?\_\_\_\_ If hired, would you have a reliable means of transportion to and from work? Yes No Are you at least 18 years old? Yes No (if under 18, hire is subject to verification that you are of minimun legal age) If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country? Yes No Are you able to perform the essential functions of the job for which you are applying? Yes No If no, describe the functions that you cannot perform:

<b>NOTE:</b> We comply with the ADA and consider resonable accommo for eligible applicants/employees to perform essential functions. Hir examination, and a skills and agility tests.				
Have you ever been convicted of a criminal offense?		Yes	No	
If yes, state nature of the crime(s), when and where convicted and	disposition of the case(	s):		
NOTE: No applicant will be denied employment solely on the groun. The nature of the offense, the date of the offense, the surrounding offense to the position(s) applied for may, however, be considered)	circumstances and the			
Are you currently employed?	Yes	No		
If so, may we contact your current employer?	Yes	No		
Employment History				
List below all present and past employment starting with your most Account for all periods of unemployment. You must complete this s		a resume.		
Name of Employer:Address:				
Type of Business:				
Phone: Supervisor's Name:				
Your Position and Duties:				
Date of Employment: From:	To:			
Reason for Leaving:				

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Phone:		
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Reason for Leaving:		

NOTE: Attach additional page(s) if necessary.

## **Education & Training** Elementary/High School: 1 2 3 4 5 6 7 8 9 10 11 12 Name/ City\_ College: 1 2 3 4 5 6 Name/ City Degree/Major: Dates Vocatonal/Business School(s): Dates Name/ City **Military Service** Have you obtained and special skills or abilities as the result of service in the military? Yes If so, describe: References List below three (3) people not related to you who have knowledge of your work performance within the last five (5) years: Name: Address:\_\_\_ Occupation: Phone: Number of Years Acquainted: Name: Address: Occupation: \_\_\_\_\_ Number of Years Acquainted:\_\_\_\_\_ Phone: Name:\_ Address: Occupation: Phone:\_ Number of Years Acquainted:

## I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery. I hereby authorize the company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure. I hereby agree to submit to binding arbitration all disputes and claims arising out of the submission of this application. I further agree, in the event that I am hired by the company, that all disputes that cannot be resolved by informal internal resolution which might arise out of my employment with the company, whether during or after that employment, will be submitted to binding arbitration. I agree that such arbitration shall be conducted under the rules of the American Arbitration Association. This application contains the entire agreement between the parties with regard to dispute resolution, and there are no other agreements as to dispute resolution, either oral or written. I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative. Signature of Applicant:\_\_\_\_\_\_

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

PLEASE READ CAREFULLY, INITIAL EACH PARAGRAPH AND SIGN BELOW