

## **Standard Application for Employment**

We are an equal opportunity employer, committed to excellence through diversity. It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classifications.

Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions on this application. You may attach a résumé, but all questions must be answered.

"Employer"	mployer"			Position applying for							
PERSONAL DATA											
Name (last, first, middle)											
Street Address and/or Mailing Address			City				Sta	ate	Zip		
Home Telephone Number		Email Address				Cellular Tele	ohone Nu	Number			
Date you can start work		Pay Rate Desired		Do yo			you have a High School Diploma or GED?  Yes  No				
POSITION INFORM	ΓΙΟΝ INFORMATION Check all that you are willing to work										
Hours: Full Time Part Time											
Are you authorized to work i	in the U.S. on an unrestricted	basis?					Yes		No		
Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment.)  Yes No If yes, explain:											
If selected for employment are you willing to submit to a background check?  Yes No No											
QUALIFICATIONS Please list any education or training you feel relates to the position applied for that would help you perform the work, such as schools, colleges, degrees, vocational or technical programs, and military training.											
	School Na	nme	I	Degree			Address/City/State				
School											
School											
Other											
SPECIAL SKILLS 13	ist any special skills or experi	ence that you feel woul	ld help	you in the po	sition that	you are applying	ng for (lea	adership, o	rganization	s/teams, etc.	
REFERENCES Plea professional references, then	ase list three professional refe list personal, unrelated refere	erences not related to you	ou, with	ı full name, a	ddress, ph	none number, ar	d relation	nship. If yo	ou don't ha	ve three	
Name Ad		Address/Cit	/City/State				Phone	e Relationship			



Job Title #1

Company Name  Supervisor's Name  Phone Number  Zip  Duties:  Reason for Leaving  I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am mployed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any of the fact forth in this application and release the Employer from any liability. The employer may contact any listed references on this application.  I acknowledge and understand that the company is an "at will" employer. Therefore, any employee (regular, temporary, or other type of categor mployee) may resign at any time, just as the employer may terminate the employment relationship with any employee at any time, with or without cause, r without notice to the other party.							
Reason for Leaving Surring Pay Rate Ending Pay Rate  May we contact your present employer? Yes No No N/A  Start Date (movdayyr) End but (movday/yr)  Start Date (movday/yr)  Start Date (movday/yr)  Start Date (movday/yr)  Phone Number  Supervisor's Name Ending Pay Rate  Duties  Surring Pay Rate Ending Pay Rate  Lading Pay Rate  Lading Pay Rate  Duties Surring Pay Rate  Surring Pay Rate  Ending Pay Rate  Ending Pay Rate  Duties Surring Pay Rate  Surring Pay Rate  Ending Pay Rate  Duties Surring Pay Rate  Surring Pay Rate  Ending Pay Rate  Ending Pay Rate  Duties Surring Pay Rate  Ending Pay Rate	Company Name	Supervisor's Na	ame	Phone Number			
Reason for Leaving Surface Supervisor's Name Supervisor's Name Surface	City	State		Zip			
May we contact your present employer?  Yes No No N/A  Job Title #2  Suart Date (moday/syr)  End Date (moday/syr)  End Date (moday/syr)  Suart Date (moday/syr)  Dottes  Starting Pay Rate  Ending Pay Rate  Job Title #3  Suart Date (moday/syr)  End Date (moday/syr)  End Date (moday/syr)  End Date (moday/syr)  End Date (moday/syr)  Dottes  Suarting Pay Rate  Assurt Date (moday/syr)  Supervisor's Name  Phone Namber  City  Start  Start Date (moday/syr)  End Date (moday/syr)  End Date (moday/syr)  End Date (moday/syr)  Dottes  Reason for Leaving  Starting Pay Rate  Ending Pay Rate  Ending Pay Rate  Ind Date (moday/syr)  End Date (moday/s	Duties:	•		-			
Start Date (modday/yr)   End Date (modday/yr)	Reason for Leaving		Starting Pay Rate	Ending Pay Rate			
City State Zip  Duties.    Starting Pay Rate   Ending Pay Rate	May we contact your present employer?	Yes	No N/A				
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Duties    Starting Pay Rate   Ending Pay Rate	Company Name	Supervisor's Na	ame	Phone Number			
Reason for Leaving    Starting Pay Rate   Ending Pay Rate	City	State		Zip			
Start Date (mo/day/yr)   End Date (mo/day/yr)	Duties:	•					
Company Name  Supervisor's Name  Phone Number  Zip  Duties:  Starting Pay Rate  Ending Pay Rate  Ending Pay Rate  Ending Pay Rate  Ending Pay Rate  Supervisor's Name  Phone Number  Supervisor's Name  Phone Number  Zip  Duties:  Starting Pay Rate  End Date (mo/day/yr)  End Date (mo/day/yr)  End Date (mo/day/yr)  Supervisor's Name  Phone Number  Zip  Duties:  Reason for Leaving  Starting Pay Rate  Ending Pay Rate  Ending Pay Rate  I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am mployed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any of the fit or forth in this application and release the Employer from any liability. The employer may contact any listed references on this application.  I acknowledge and understand that the company is an "at will" employer. Therefore, any employee (regular, temporary, or other type of categor mployee) may resign at any time, just as the employer may terminate the employment relationship with any employee at any time, with or without cause, r without notice to the other party.	Reason for Leaving		Starting Pay Rate	Ending Pay Rate			
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	Applicant Signature		Date				

WORK HISTORY Start with your present or most recent employment and work back. Use separate sheet if necessary. (INCLUDE PAID AND UNPAID POSITIONS) Start Date (mo/day/yr)

End Date (mo/day/yr)