

Are you available to work: ___ Full Time ___ Part Time ___ Days ___ Evenings

Can you travel if a job requires it? ___ Yes ___ No

Have you been convicted of a felony within the last 7 years? ___ Yes ___ No

(Conviction will not necessarily disqualify an applicant from employment)

If yes, please explain _____

EDUCATION

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Describe any special training, apprenticeship, skills and extra-curricular activities:

EMPLOYMENT EXPERIENCE – start with your most recent job.

Employer	Dates Employed		Work Performed
Address	From	To	
Telephone No.	Hourly Rate/Salary		
Job Title	Starting	Final	
Supervisor			
Reason for Leaving:			
Employer	Dates Employed		Work Performed
Address	From	To	
Telephone No.	Hourly Rate/Salary		
Job Title	Starting	Final	
Supervisor			
Reason for Leaving:			
Employer	Dates Employed		Work Performed
Address	From	To	
Telephone No.	Hourly Rate/Salary		
Job Title	Starting	Final	
Supervisor			
Reason for Leaving:			

*If you need additional space, please continue on a separate sheet of paper.

REFERENCES: Please list 3 References:

all must be a previous non-related and a supervisor/contact that can verify your work abilities

1. Name: _____ Phone No. _____
How many years known: _____
2. Name: _____ Phone No. _____
How many years known: _____
3. Name: _____ Phone No. _____
How many years known: _____

APPLICANT'S STATEMENT

I certify that the 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 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 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 PERSONAL DEPARTMENT USE ONLY

Date of Interview _____

Interviewer _____

Remarks _____

2nd Interview ___ Yes ___ No

Date of Employment _____

Job Title _____

Hourly Rate/Salary _____

Approved by _____ Title _____ Date _____