

EMPLOYMENT APPLICATION

This employer complies with the American with Disabilities Act of 1990. We will not use the information on this application to discriminate in employment opportunities or practices on the basis of race, color, disability, religion, gender, national origin, age, marital status, veterans status, genetic information or any other characteristic protected by applicable law.

GENERAL INFORMATION

Position Desired: _____

Last Name: _____ First Name: _____ Middle Initial: _____

Home Address: _____ Apt/Bldg #: _____

City: _____ State: _____ Zip: _____

Home or Cell Phone: _____ Are you 18 years of age or older? Yes No

Are you authorized to work in the United States? Yes No

Since the age of 18, have you ever been convicted of a misdemeanor or felony? (Note: A conviction will not necessarily bar you from employment.) Yes No

EMPLOYMENT HISTORY

List the last three positions you have held, beginning with most recent. All information must be completed, even if you are submitting a resume.

Date: MM/YYYY	Employer Name and Address	Position	Supervisor & Title	Phone#	Rate of Pay
From:					Started at:
To:					End:

Reason for Leaving: _____

May we contact? Yes No If No, explain: _____

From:					Started at:
To:					End:

Reason for Leaving: _____

May we contact? Yes No If No, explain: _____

From:					Started at:
To:					End:

Reason for Leaving: _____

May we contact? Yes No If No, explain: _____

EDUCATION

	Name & Location	Course of Study	Degree Earned
High School:			
College:			
Technical School:			
Certifications:			
Other:			

PROFESSIONAL REFERENCES

Name	Relationship	Phone Number
1.		
2.		
3.		

CERTIFICATION AND AGREEMENT

I certify that the answers given herein are true and complete. I authorize investigation of statements contained herein as may be necessary. I understand that false statements, omissions, or misleading statements on this application shall be considered cause for dismissal. If my employment is terminated because of such omissions or misleading statements, I agree that my employers shall not be held liable in any respect.

Signature: _____ Date: _____