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**APPLICATION FOR EMPLOYMENT**

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

**PERSONAL**

|  |  |
| --- | --- |
| **Last Name First Name** | **Date** |
| **Street Address** | **Home Telephone** |
| **City, State, Zip Code** | **Mobile Telephone** |
| **Have you ever applied for employment with us?****Yes No If yes, month and year:**  | **Email Address** |
| **Position Desired:** | **Are you of legal age to work?****Yes No \_\_\_\_\_\_**  |
| **Apart from absence for religious observances, are you available for fulltime work?****Yes No If no, what hours can you work?**  | **Will you work overtime if asked?****Yes No**  |
| **Are you legally eligible to work in the United States?** | **When will you be available to start?** |
| **Please list any special training or skills (languages, machine operation, etc.)** |

**EDUCATION**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **School Attended** | **Name and** **Location of****School** | **Course of Study** | **Number of****Years****Completed** | **Did You****Graduate?** | **Degree****or****Diploma?** |
| **Elementary** |  |  |  |  |  |
| **High School** |  |  |  |  |  |
| **Business/Trade/****Technical** |  |  |  |  |  |

**EDUCATION CONTIUED**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Undergraduate** |  |  |  |  |  |
| **Graduate** |  |  |  |  |  |

**EMPLOYMENT**

Please give complete full-time and part-time employment record. Start with your present or most recent employer.

|  |  |
| --- | --- |
| **Company Name** | **Telephone Number:** |
| **Address** | **Employment dates (month/year)****From:** **Until:** |
| **Name of Supervisor** | **Pay rate:****Start:****Last:** |
| **Job Title Job Description** | **Reason(s) for leaving:** |

|  |  |
| --- | --- |
| **Company Name** | **Telephone Number:** |
| **Address** | **Employment dates (month/year)****From:** **Until:** |
| **Name of Supervisor** | **Pay rate:****Start:****Last:** |
| **Job Title Job Description** | **Reason(s) for leaving:** |

|  |  |
| --- | --- |
| **Company Name** | **Telephone Number:** |
| **Address** | **Employment dates (month/year)****From:** **Until:** |
| **Name of Supervisor** | **Pay rate:****Start:****Last:** |
| **Job Title Job Description** | **Reason(s) for leaving:** |

**DO NOT CONTACT:**

**Employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Reason: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Initial: \_**

**PROFESSIONAL REFERENCES**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Employer and Relationship** | **Phone Number** | **Email Address** | **Best Time to Contact** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

I attest that the information provided in this application for employment is true, correct and complete.

I understand that if I am employed, any misstatement or omission on this application may result in my dismissal.

I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

I authorize the employer to engage an investigative consumer reporting agency to report on my credit and personal history. If a report is obtained, you must provide, at my request, the name of agency, so I may obtain from the agency the nature and substance of the information contained in the report.

I authorize the employer to contact the employers listed above and authorize the employers above to discuss my employment with them.

**Signature: \_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**