Standard Application for Employment

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 <u>must</u> be answered.

"Employer"				Pos	ition apply	ring for					
PERSONAL DATA	A										
Name (last, first, middle)											
Street Address and/or Ma	niling Addres	s			City				State	Zip	1
Home Telephone Numbe	r		Business Telephone	Numbo	er		Cellular	Felephon	e Number		
Date you can start work			Salary Desired				Do you have a High School Diploma or GED? Yes ☐ No ☐				
POSITION INFO	RMATIO	N Check all that	you are willing to work								
Hours: Full Time Part Time		Days Eveni				yard ends		Statu	s: Regular Tempor		
Are you authorized to wo	rk in the U.S	on an unrestricted	basis?					Ye	s 🔲	No	
Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment.) Yes No If yes, explain:											
Have you been told the ex		ions of the job or ha	ave you been viewed a	copy of	f the job desc	ription list	ting the esse	ential fun	ctions of the	job?	
Can you perform these essential functions of the job with or without reasonable accommodation? Yes 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 Name			Degree		Address/City/State				
School											
School											
Other											
SPECIAL SKILLS	List any sp	ecial skills or exper	ience that you feel wou	ld help	you in the po	sition tha	t you are ap	plying fo	r (leadership,	organiza	tions/teams, etc.
REFERENCES professional references, t			erences not related to you	ou, witl	n full name, a	ddress, pl	hone numbe	er, and re	lationship. If	'you don'	t have three
Name			Address/City/State					Ph	ione		Relationship
									_		

WORK HISTORY Start with your present or most recent employed by Title #1	Start Date (mo/		End Date (mo/day/yr)			
			Zine Zune (moreuj/ji)			
Company Name	Supervisor's Na	ame	Phone Number			
City	State	•	Zip			
Duties:	•					
	,,,,, -,,					
Reason for Leaving		Starting Salary	Ending Salary			
May we contact your present employer?	Yes 🗌	No N/A				
Job Title #2	Start Date (mo/	day/yr)	End Date (mo/day/yr)			
Company Name	Supervisor's Na	ame	Phone Number			
City	State		Zip			
Duties:	•					
Reason for Leaving		Starting Salary	Ending Salary			
Job Title #3	Start Date (mo/	day/yr)	End Date (mo/day/yr)			
Company Name	Supervisor's Na	ame	Phone Number			
City	State		Zip			
Duties:						
Reason for Leaving		Starting Salary	Ending Salary			
Accessor for Ecaving		Starting Salary	Litting Salary			
Job Title #4	Start Date (mo/	day/yr)	End Date (mo/day/yr)			
Company Name	Supervisor's Na	ame	Phone Number			
City	State		Zip			
Duties:	<u> </u>		<u> </u>			
Reason for Leaving		Starting Salary	Ending Salary			
I certify that the facts set forth in this Application for Enployed, false statements, omissions or misrepresentations may at forth in this application and release the Employer from any lial I acknowledge and understand that the company is an "aployee) may resign at any time, just as the employer may termin without notice to the other party.	result in my disr bility. The empl at will" employe	nissal. I authorize the Employer loyer may contact any listed refe r. Therefore, any employee (reg	to make an investigation of any of the facts rences on this application. ular, temporary, or other type of category			
pplicant Signature		Date				

