

Application for Employment

Please fill out form completely for employment consideration. Fax, mail, or drop off completed form to the admin office.

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin or handicap. We are an equal opportunity employer.

Personal Information

Last Name	First	Middle	Date
Street Address			Phone # () -
City, State, Zip			Email Address
What was your previous address?(Only necessary if you have lived less than 2 years at current address)			How long at previous address? _____ years _____ months
Are you over 18 years of age? If not, employment is subject to verification of minimum legal age.			How long at present address? _____ years _____ months
Have you ever applied for employment with us? If Yes: Month and Year: _____ Department applied for: _____			Social Security No. - -
How did you learn of our organization?			Department you are applying for: _____
Are you legally eligible for employment in the United States?			When will you be able to work?
Are you employed now?			If so, may we inquire with your present employer?
Have you been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by a court? If Yes, describe in full.			
Are there any reasons for which you might not be able to perform the job duties (with a reasonable accommodation)? If Yes, please explain.			
Drivers License #		State	Any violations?

Education

School	Name and location of school	Course of study	No. of years completed	Did you graduate?	Degree or diploma
High					
Trade School					
College					
Other					

Military

Complete this section if you served in the U.S Armed Forces	Branch of Service: _____
Describe your duties and any special training:	Period of Active Duty (Month & Year) From: _____ To: _____
	Rank at discharge: _____
	Date of final discharge: _____

Employment History

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

1	Company Name	Telephone () -
	Address	Employed (month and year) From: To:
	Name of Supervisor	Hourly Rate Start: Finish:
	Start job title and describe your work	Reason for leaving
2	Company Name	Telephone () -
	Address	Employed (month and year) From: To:
	Name of Supervisor	Hourly Rate Start: Finish:
	Start job title and describe your work	Reason for leaving

3	Company Name	Telephone () -
	Address	Employed (month and year) From: To:
	Name of Supervisor	Hourly Rate Start: Finish:
	Start job title and describe your work	Reason for leaving
4	Company Name	Telephone () -
	Address	Employed (month and year) From: To:
	Name of Supervisor	Hourly Rate Start: Finish:
	Start job title and describe your work	Reason for leaving
We may contact the employers listed above unless you indicate those you do not want us to contact.		Do not contact Employer Number(s): _____

References: Give below the names of three people not related to you, whom you have known at least one year.		
Name	Address	Years Acquainted
1.		
2.		
3.		

The information provided in this application for employment is true, correct and complete. If employed, and misstatements or omissions of fact 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.

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

_____ Date

_____ Signature