PLEASE PRINT

Employment Application

Date: / /

Programs, services, and employment are equally available to everyone. Please inform the Human Resources Department if you require reasonable accommodation for the application or interview.

Position applied for:

APPLICANT DATA:

Full Name: _____ (LAST / FIRST / MIDDLE)

Address: _____ City: _____ State: _____ Zip: _____

Phone: ( ) _____ Cell/Beeper/Other Phone: _____ E-Mail Address: _____

Date available to start: _____ Social Security #: _____ Salary Requirement: _____

If you are under 18 and we require a work permit, can you furnish one? ❑ Yes ❑ No

If no, please explain: _____

Have you ever worked for this company? ❑ Yes ❑ No If yes, when? _____

Are you a citizen of the United States? ❑ Yes ❑ No If not, are you legally allowed to work in the United States? ❑ Yes ❑ No

Type of employment desired: ❑ Full-time ❑ Part Time ❑ Temporary ❑ Seasonal

Have you ever pled "guilty," "no contest," or been convicted of a crime? ❑ Yes ❑ No

If yes, give dates and details: _____

Answering "yes" to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation, and position applied for will be considered.

Driver's license number if applicable to position: _____ State: _____

Who referred you to us? _____

EDUCATION:

High School: _____ Address: _____

# of Years Completed: _____ Did you graduate? ❑ Yes ❑ No

GPA: _____ Class Rank: _____

College/University: _____ Address: _____

# of Years Completed: _____ Did you graduate? ❑ Yes ❑ No Degree: _____

Major: _____ GPA: _____ Class Rank: _____

Other: _____ Address: _____

# of Years Completed: _____ Did you graduate? ❑ Yes ❑ No Degree: _____

Major: _____ GPA: _____ Class Rank: _____

REFERENCES:

Please furnish the names, addresses and telephone numbers of two people to whom you are not related and by whom you have not been employed:

Name: _____ Phone: ( ) _____

Address: _____ City: _____ State: _____ Zip: _____

Name: _____ Phone: ( ) _____

Address: _____ City: _____ State: _____ Zip: _____

SUMMARIZE YOUR SPECIAL SKILLS OR QUALIFICATIONS:

____

____

____

____

PREVIOUS EMPLOYMENT (begin with most recent position):

Dates of Employment: From___/___/___ To___/___/___ Position(s) Held: ______

Firm: ______ Address: ______

Phone: ( ) ______ Supervisor: ______ Title: ______

Responsibilities: ______

____

Starting Salary and Title: ______ Ending Salary and Title: ______

Reason for Leaving: ______

May we contact this employer for a reference? ❑ Yes ❑ No

Dates of Employment: From___/___/___ To___/___/___ Position(s) Held: ______

Firm: ______ Address: ______

Phone: ( ) ______ Supervisor: ______ Title: ______

Responsibilities: ______

____

Starting Salary and Title: ______ Ending Salary and Title: ______

Reason for Leaving: ______

May we contact this employer for a reference? ❑ Yes ❑ No

Dates of Employment: From___/___/___ To___/___/___ Position(s) Held: ______

Firm: ______ Address: ______

Phone: ( ) ______ Supervisor: ______ Title: ______

Responsibilities: ______

____

Starting Salary and Title: ______ Ending Salary and Title: ______

Reason for Leaving: ______

May we contact this employer for a reference? ❑ Yes ❑ No

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial, or medical history and other related matters as may be necessary for an employment decision. I hereby release employers, schools or persons from all liability when responding to inquiries in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: ______________________ Date: ______________