

APPLICATION FOR EMPLOYMENT

Position(s) applied for _____ Date of application ____/____/____

Name _____
Last First Middle

Address _____
Street City State ZIP Code

Telephone # () _____ Cellular/Other # () _____ E-mail Address _____

Referral Source (How did you hear about us?) _____

Have you ever been employed here before? If **yes**, give dates and positions: _____ Yes No

Are you legally eligible for employment in this country..... Yes No

Date available for work..... ____/____/____ What is your desired salary range?.....\$ _____

Type of employment desired: Full-Time Part-Time

Driver's license number required if driving may be required in the job for which you are applying: _____ State _____

Have you ever been convicted of a felony..... Yes No

If **yes**, please provide date(s) and details: _____

Employment History

Starting with your most recent employer, provide the following information.

Employer Telephone # ()	Dates employed: Month / Year to Month / Year
Street address City State	Compensation (Starting) <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
Starting job title/final job title	Compensation (Final) <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
Immediate supervisor and title	Commission/Bonus/Other Compensation \$
Why did you leave?	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later
Summarize the type of work performed and job responsibilities	
Employer Telephone # ()	Dates employed: Month / Year to Month / Year
Street address City State	Compensation (Starting) <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
Starting job title/final job title	Compensation (Final) <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
Immediate supervisor and title	Commission/Bonus/Other Compensation \$
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Starting job title/final job title	Compensation (Final) <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ per
Immediate supervisor and title	Commission/Bonus/Other Compensation \$
Why did you leave?	May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later
Summarize the type of work performed and job responsibilities	

Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying: _____

Computer Skills (Check appropriate boxes. Include software titles and years of experience.)

- Word Processing _____ Years: _____ E-mail _____ Years: _____
 Spreadsheet _____ Years: _____ Internet _____ Years: _____
 Presentation _____ Years: _____ Other _____ Years: _____

I am available the days of: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

I am available to work the hours of: _____ a.m. to _____ p.m.

Educational Background

Starting with your most recent school attended, provide the following information.

School (include City & State)	Years Completed	Completed	GPA	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree _____ <input type="checkbox"/> Certification _____		

References

List names and telephone numbers of three business/work references. If not applicable, list three school or personal references who are not related to you.

Name	Title	Relationship to you	Telephone	# Years Known
			()	
			()	
			()	

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete, and correct. I authorize the employer, its representatives, employees or agents to contact and obtain information from all references, employers, public agencies, and educational institutions to verify the accuracy of all information provided by me in this application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to eliminate me from further consideration for employment, or may result in my immediate discharge from the employer's service, whenever it is discovered.

Applicant Signature: _____ Date: ____/____/____