

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Answer each question fully and a Use blank paper if you do not ha In reading and answering the foldiscrimination based upon non-jet.	ave enough room lowing questions,	on this application be aware that r	on. PLEASE PR	RINT, except	for signature or	n back of app		
Job Applied for				Today's Date				
Are you seeking: Full-time	Part-time	Temporary $\square$	employment?	When could	could you start work?			
Last Name	First Name		Middle Name		Telephone Number			
Present Street Addre	ess	City		State		Zip	Code	
Are you 18 years of age or ole (If you are hired, you may be require						Yes 🗌	No 🗌	
Social Security #	If hired, (	can you furnish p	oroof you are eli	gible to wor	k in the U.S.?	Yes 🗌	No 🗆	
Have you ever applied here befo	re? Yes		If yes, when?					
Were you ever employed here?	Yes [	No 🗌	If yes, when?					
Have you ever been convicted of plea of "guilty" or "no contest	•	•	ns.)			Yes 🗌	No 🗌	
If yes, give details (A conviction will not neco								
If employed, do you expect to be or employment outside of o						Yes 🗌	No 🗌	
If yes, give details								
For Driving Jobs Only: Do you	have a valid driv	ver's license?				Yes 🗌	No 🗌	
Driver's License Numbe	er		Class of L	icense	State Lice	nsed In		
Have you had your dri	iver's license sus	pended or revo	ked in the last 3	gyears?		Yes 🗌	No 🗌	
If yes, give deta	ils:							
List professional, trade, busines race, color, religion, national or			-	-		•		
LIST NAME AND ADDRESS OF SCHOOLS		Numbe Year Comple	rs	Diploma/ Degree/ Certificate	Subjects Studied			
High School or GED:								
College or University:								
Vocational or Technical:								
What skills or additional training	g do you have tha	t relate to the jo	ob for which you	ı are applying	g?			
What licenses do you have that r	elate to the job fo	or which you are a	applying?					

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. if self-employed, give firm name and supply business references. Note: A job offer may be contingent upon acceptable references from current and former employers.						
NAME OF EMPLOYER		JOB TITLE AND DUTIES				
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM	ТО			
CITY, STATE, ZIP CODE		PAY: START \$ FINAL \$				
SUPERVISOR(S)	TELEPHONE	Reason For Leaving				
NAME OF EMPLOYER		JOB TITLE AND DUTIES				
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM	ТО			
CITY, STATE, ZIP CODE		PAY: START \$ FINAL \$				
SUPERVISOR(S)	TELEPHONE	REASON FOR LEAVING				
NAME OF EMPLOYER		JOB TITLE AND DUTIES				
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM	ТО			
CITY, STATE, ZIP CODE		PAY: START \$ FINAL \$				
SUPERVISOR(S)	TELEPHONE	REASON FOR LEAVING				
NAME OF EMPLOYER	1	JOB TITLE AND DUTIES				
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM	ТО			
CITY, STATE, ZIP CODE		PAY: START \$ FINAL \$				
SUPERVISOR(S)	TELEPHONE	REASON FOR LEAVING				
Have you worked or attended school under any other names? Yes No If yes, give names:  Are you presently employed? Yes No If yes, whom do you suggest we contact?  Have you ever been fired from a job or asked to resign? Yes No If yes, please explain:  Give three references, not relatives or former employers.  Name Address Phone						
PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING  I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.  I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.  I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required.  I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.  I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESIDENT OF THE ORGANIZATION HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE EMPLOYEE. IF EMPLOYEE, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.  I have read, understand, and by my signature consent to these statements.  Signature:  Date:  Date:  Date:  Date:						