



# 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 must be answered.

PERSONAL DATA			
Name (last, first, middle):			
Street Address and/or Mailing Address:		City:	State: Zip:
Home Telephone Number:	Cellular Telephone Number:	Email Address:	
Date you can start work:	Salary Desired:	Do you have a High School Diploma or GED? Yes <input type="checkbox"/> No <input type="checkbox"/>	
POSITION INFORMATION			
Position applying for:		Hours: Full Time: <input type="checkbox"/>	Part Time: <input type="checkbox"/> Seasonal: <input type="checkbox"/>
Are you legally eligible to work in the U.S?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever worked for this employer? If yes, write the start and end dates:		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment.) explain:		If yes, Yes <input type="checkbox"/>	No <input type="checkbox"/>
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
High School/GED			
College			
Other			
SPECIAL SKILLS List any special skills or experience that you feel would help you in the position that you are applying for (leadership, organizations/teams, etc.)			
TECHNICAL SKILLS List any specialized tech skills and/or specific equipment operations that you feel would help you in the position that you are applying for:			
WORK HISTORY			
CURRENT JOB TITLE:		Start Date (mo/day/yr):	End Date (mo/day/yr):
Company Name:	Supervisor's Name:		Phone Number:
City:	State:	Zip:	
Duties:			
Reason for Leaving:		Starting Salary:	Ending Salary:
May we contact your present employer? Yes <input type="checkbox"/> No <input type="checkbox"/>			
ADDITIONAL INFORMATION			
I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any of the facts set forth in this application and release the Employer from any liability. The employer may contact any listed references on this application. I acknowledge and understand that the company is an "at will" employer. Therefore, any employee (regular, temporary, or other type of category employee) may resign at any time, just as the employer may terminate the employment relationship with any employee at any time, with or without cause, with or without notice to the other party.			
Applicant Signature:		Date:	