Application for Employment





Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

| Position(s) applied for | | Date of application_ | 1_1 |
|--|----------------------------------|--|--------------|
| Name | | Applicant ID # | |
| Address | irst | Middle | |
| Street | City | State | ZIP (ode |
| Telephone # (Cellular/Other Referral Source (How did you hear about us?) | | E-mail Address | |
| | | | |
| If you are under 18 and it is required, can you furnish | | | les live |
| If no, please explain: | | | |
| Have you ever been employed here before? If yes, give | | | |
| Is this application a request for reemployment followin If yes , additional information may be requested. | g an extended military leav | ve of absence from this company? | Yes No |
| Are you legally eligible for employment in this country | ? | | Yes No |
| Date available for work | What is your desired salar | ry range? | .\$ |
| Type of employment desired: Full-Time | | nporary Seasonal E | |
| Are you able to perform the "essential functions" of the | job for which you are app | lying (with or without reasonable accom | modation)? |
| This question is not designed to elicit information about an appli particular accommodation, or whether accommodation is necessa | cant's disability. Please do not | provide information about the existence of a dis | ability, |
| Yes No Need more information abou | at the job's "essential function | ons" to respond | |
| Driver's license number required if driving may be required | ed in the job for which you | are applying: | State |
| Answering "yes" to either part of the following question does not seriousness and nature of the violation, rehabilitation and position | constitute an automatic bar to | employment. Factors such as date of the offens | e, |
| Have you ever pleaded "guilty" or "no contest" to, or b | | | Yes No |
| | | | |
| If yes , please provide date(s) and details: | | | |
| | | | |
| Employment History | | | |
| Starting with your most recent employer, provide the fo | 0 | | |
| | phone # | Dates employed: Month Year to | Month Year |
| Street address City | State | Compensation (Starting) Hourly Salary \$ | |
| Starting job title final job title | | Hourly Salary \$ Commission/Bonus/Other Compensation \$ | per |
| Immediale supervisor and title (for most recent position held) | May we contact for reference | | |
| Why did you leave? | Yes No Later | Hourly Salary \$ | per |
| Summarize the type of work performed and Job responsibilities | E-mail; | Commission/Bonus/Other Compensation \$ | |
| Employer Tele | phone # | Month / Year | Month / Year |
| |) | Dates employed: to | Tondi / Teat |
| Street address City | State | Compensation (Starting) Hourly Salary \$ | per |
| Starting job title final job title | | Commission/Bonus/Other Compensation \$ | |
| Immediate supervisor and title (for most recent position held) | May we contact for referenc | Philipping and the philipping an | |
| Wify did you leave? | E-mail: | Hourly Salary \$ Commission/Bonus/Other Compensation \$ | per |
| Summanze the type of work performed and job responsibilities. | E mote | Commission political compensation | |
| Employer Tele | phone # | Month / Year | Month Year |
| Street address (Lify | State | Dates employed: to Compensation (Starting) | |
| Starting job title/final job title | | Hourly Salary \$ | per |
| | | Commission/Bonus/Other Compensation \$ | |
| Immediate supervisor and title (for most recent position held) | May we contact for reference | e? Compensation (Final) Hourly Salary \$ | per |
| Why did you leave? | E-mail: | Commission/Bonus/Other Compensation \$ | p. |
| Summarize the type of work performed and job responsibilities | | | |

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

| Word Processing | Years: | E-mail | Years: |
|------------------------------------|--|--|---|
| ☐ Spreadsheet | Years: | ☐ Internet | Years: |
| Presentation | Years: | ☐ Other | Years: |
| | | | |
| | cent school attended, provide the fol | lowing information. | |
| School (includ | le City & State) | Years Completed Comp | GPA Class Rank Major/Minor |
| | | Diploma GE | |
| | | Degree Certification | |
| | | C Other | |
| | | _ Diploma | |
| | | Degree | |
| | | Certification | |
| | | □ Diploma □ GE | |
| | | C. Degree | |
| | | Certification Other | |
| | | C other | |
| | | | |
| | | erences who are <i>not</i> related to you an | d are <i>not</i> previous supervisors. |
| If not applicable, list three | school or personal references who a | re not related to you. | |
| Name | | ationsh to You Telephone | E-mail #of Yea |
| | 1 | .0 100 | Kaloni |
| | | | |
| | | () | |
| | | () | |
| | | () | |
| | | | |
| | | | ~ . |
| SS# | We will use this information only fo | r employment purposes and make reasonable | efforts to safeguard your privacy. |
| | | | |
| | | work with this employer is true, complete and | correct. |
| • | | nployees or agents to contact and obtain infor | |
| professional), employers, public a | agencies, licensing authorities and educations | al institutions and to otherwise verify the accu | racy of all information provided by me in this |
| application, resumé or job intervi | iew. I hereby waive any and all rights and cla | ims I may have regarding the employer, its ago | ents, employees or representatives, for seeking, |
| | | anner, in the employment process and all other | r persons, corporations or organizations for |
| furnishing such information abou | | | |
| | does not unlawfully discriminate in employn employment on any basis prohibited by app | | ed for the purpose of limiting or eliminating any |
| •• | | | the employer and still wish to be considered for |
| • • | for me to reapply and fill out a new applicat | | |
| | | | te employer reserves the same right to terminate m |
| | | ce, except as may be required by law. This apple on supervisor or representative of the employe | ication does not constitute an agreement or contra- |
| | | | writing and signed by the employer's president. |
| | | | nited States and that federal immigration laws |
| require me to complete an I-9 Fo | | inti) and regar authorization to work in the or | inted states and that rederal manigration laws |
| This Company does not tolerate | e unlawful discrimination in its employme | nt practices. No question on this application | is used for the purpose of limiting or excluding |
| status under applicable federal, | state, or local law. This Company likewise | does not tolerate harassment based on sex, i | tizenship, age, disability, or any other protected race, color, religion, national origin, citizenship, ints will be investigated promptly and thorough |
| I understand that any informati | ion provided by me that is found to be fals | • | pect, will be sufficient cause to (i) eliminate m |
| DO NOT SIGN HNTH | YOU HAVE READ THE ABOV | F ADDITO ANT STATEMENT | |
| DO HOT SIGN ONLIT | TOO HAVE KEND THE WOOM | EALILICAM STATEMENT. | |
| I certify that I have read | fully understand and accept all term | as of the foregoing Applicant Statem | ent |
| I certify that I have read, | fully understand and accept all term | ns of the foregoing Applicant Stateme | ent. |

