

APPLICATION FOR EMPLOYMENT

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age or marital status, or the presence of non-related medical condition or handicap.

PLEASE PRINT OR TYPE

_____ (Date of Application)

Position(s) Applied For _____

Name _____
(Last) (First) (Middle)

Address _____
(Number) (Street) (City) (State) (Zip)

Telephone (____) _____ Social Security No. _____

If employed, are you under 18; can you furnish a work permit? ____ Yes ____ No

Are you employed now? ____ Yes ____ No

May we contact your present employer? ____ Yes ____ No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? ____ Yes ____ No

(Proof of citizenship or immigration status may be required upon employment.)

On what date would you be available for work? _____

Are you available to work : ____ Full Time ____ Part Time ____ Shift Work ____ Temporary

Are you on a lay-off and subject to recall? ____ Yes ____ No

Do you know of any condition that would prevent you from carrying out the duties of the position you are applying for during the next year? ____ Yes ____ No

(If yes, explain on separate sheet)

Can you travel if a job requires it? ____ Yes ____ No

Can you work evenings and/or weekends? ____ Yes ____ No

Have you been convicted of a felony within the last 7 years? ____ Yes ____ No
(If yes, please explain on separate sheet.)

Veteran of the U.S. Military service? ____ Yes ____ No

If Yes, What Branch: _____

WORK EXPERIENCE

On this page, starting with your most recent position, summarize your work experience detailing: job title, job duties, employer, dates employed, final annual salary, immediate supervisor, and reason for leaving.
