

Employment Application

Application Date _____

| | | | |
|----------------|------------------|------------|------------------------|
| _____ | _____ | _____ | _____ |
| Last Name | First Name | Middle | Social Security Number |
| _____ | _____ | () | () |
| Street Address | City, State, Zip | Home Phone | Other Phone |

Have you previously applied for a position or worked for our Company? yes no (If yes, please list dates and location of previous employment):

| | | |
|---|--|---|
| Are you 18 years old or older? <input type="checkbox"/> yes <input type="checkbox"/> no | Can you show proof of your eligibility to work in the U.S.? <input type="checkbox"/> yes <input type="checkbox"/> no | Have you ever been convicted of a felony? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, explain |
|---|--|---|

Are there any special circumstances necessary for you to perform the job for which you are applying? yes no (If yes, please explain):

EMPLOYMENT DESIRED

| | | | |
|--------------------|---|-----------------|------------|
| _____ | _____ | \$ _____ | _____ |
| Position Desired | # hrs/wk and days of the week you are available | Salary Expected | Start Date |
| _____ | _____ | \$ _____ | _____ |
| Secondary Position | # hrs/wk and days of the week you are available | Salary Expected | Start Date |

EDUCATION

| | | | | |
|---|---------------------------|---------------------------|---------------------|--------------------------|
| Circle highest grade or # of years completed | Grade School 4 5 6 7 8 | High School 9 10 11 12 | Jr College 1 2 3 | College 1 2 3 4 5 6 7 |
|---|---------------------------|---------------------------|---------------------|--------------------------|

| | | | |
|--------------|------------------|-----------|-------------------|
| _____ | _____ | _____ | _____ |
| High School | City, State, Zip | Graduate? | Diploma |
| _____ | _____ | _____ | _____ |
| College | City, State, Zip | Graduate? | Diploma or Degree |
| _____ | _____ | _____ | _____ |
| Other School | City, State, Zip | Graduate? | Diploma or Degree |

Summarize any experience, knowledge, skills, abilities, or specialized training you would like us to know about:

EMPLOYMENT HISTORY (List most recent employer first. This section must be completed even if a resume is attached)

| | | |
|-------------------------|-------------------------|--|
| From: _____ | Company Name: _____ | Reason For Leaving: _____ |
| To: _____ | City, State, Zip: _____ | _____ |
| Starting Wage: \$ _____ | Phone Number: _____ | _____ |
| Ending Wage: \$ _____ | Supervisor Name: _____ | May we contact this employer? <input type="checkbox"/> Y <input type="checkbox"/> N |