

Employment Application

PLEASE PRINT OR TYPE						
POSITIONS(S) APPLIED FOR		DATE OF APPLIC	CATION _	//	_	
REFERRAL SOURCE o ADVERTISEMENT	O EMPLOYEE C) RELATIVE O W	VALK-IN	O OTHER		-
NAME OF SOURCE (IF APPLICABLE)						
NAMELAST						
	FIRST			MIDDLI	Ξ	
ADDRESSSTREET		CITY		STATE	ZIP (CODE
TELEPHONE NUMBER ()						
IF NECESSARY, THE BEST TIME TO CALL						
MAY WE CONTACT YOU AT WORK?					o YES	o NO
IF YES, WORK NUMBER AND BEST TIME T	O CALL		()			
						TIME
IF YOU ARE UNDER 18, CAN YOU FURNISH	I A WORK PERMIT	Γ?			o YES	o NO
HAVE YOU FILED AN APPLICATION WITH	THIS COMPANY E	3EFORE?			o YES	o NO
IF YES, GIVE DATE						_/
HAVE YOU EVER BEEN EMPLOYED WITH	THIS COMPANY B	BEFORE? o YES	o NO	FROM _ /_	/_ TO _	_//_
DO ANY OF YOUR RELATIVES WORK HER	E? o YES o NO	. RELATIVE'S NA	ME/S			
ARE YOU LEGALLY ELIGIBLE FOR EMPLO (PROOF OF U.S. CITIZENSHIP OR IMMIGRA						o NO
DATE AVAILABLE FOR WORK					/	/
LIST YOUR AVAILABILITY TO WORK (DAYS						
TYPE OF EMPLOYMENT DESIRED OF	ULL TIME o	PART-TIME	o TEMP	ORARY		
ARE YOU ON A LAY-OFF AND SUBJECT TO) RECALL?				o YES	o NO
WILL YOU WORK OVERTIME IF REQUIRED)?				o YES	o NO
DRIVER'S LICENSE NUMBER (IF REQUIRE	D BY JOB)		STATE			

EMPLOYMENT HISTORY

LIST YOUR LAST FOUR (4) EMPLOYERS, ASSIGNMENTS OR VOLUNTEER ACTIVITIES, STARTING WITH THE MOST RECENT, INCLUDING MILITARY EXPERIENCE. EXPLAIN ANY GAPS IN EMPLOYMENT IN COMMENTS SECTION BELOW.

INCLUDING MILITART EXPERIENCE, EXPLA				
EMPLOYER	TELEPHONE	DATES E	MPLOYED	SUMMARIZE THE NATURE OF THE WORK
	()	FROM	TO	PERFORMED AND JOB RESPONSIBILITIES:
ADDRESS			1	
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JOB TITLE				
IMMEDIATE SUPERVISOR AND TITLE			1	
IMMEDIATE SUPERVISOR AND TITLE				
REASON FOR LEAVING				
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		l	l .	l
COMMENTS (INCLUDING EXPLANATION	ON OF ANY GAPS IN EMPLO	OYMENT)		

SKILLS AND QUALIFICA EMPLOYMENT OR ÖTHER EXPER	TIONS SUMMARIZE SPECIAL SKILI ENCES THAT MAY QUALIFY YOU FOR	LS AND QUALIFICATIONS ACQUIRED FROM EMPLOYMENT.

EDUCATIONAL BACKGROUND

A. SCHOOL		O. YEARS IPLETED	C. DEGREI		ANK	E. MAJOR	E. MINOR
LIST ANY FOREIGN LANGUAGE (S) ANI	CHECK TH	E BOX THA	AT BEST DE	SCRIBES YOUR	SKILL I	LEVEL.	
LANGUAGE		READ WRI		READ AND SPEAK	Rl	EAD ONLY	SPEAK ONLY
REFERENCES JIST NAME AND TELEPHONE NUMBER OF THE SUPERVISORS. IF NOT APPLICABLE, LIST THR							T PREVIOUS
NAME	RELA		ΓΙΟΝSHIP	YEARS KNOW		T TELEPHONE	
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LIST PROFESSIONAL, TRADE, BUSINESS OR CT REVEAL SEX, RACE, RELIGION, NATIONAL OR ORGANIZA' ORGANIZA' LIST SPECIAL ACCOMPLISHMENTS, PUBLICAT NATIONAL ORIGIN, AGE, ANCESTRY, HANDIC	IGIN, AGE, AN	ICESTRY OR	OTHER PROT	ECTED STATUS.)	0	() RSHIPS WHICH W	
REVEAL SEX, RACE, RELIGION, NATIONAL OR ORGANIZA'	IGIN, AGE, AN	ICESTRY OR	OTHER PROT	ECTED STATUS.)	0	() RSHIPS WHICH W	

PLEASE READ AND SIGN BELOW

(IF THERE IS ANY PART OF THIS STATEMENT YOU DO NOT UNDERSTAND, PLEASE ASK THE INTERVIEWER ABOUT IT BEFORE SIGNING THE STATEMENT)

- CERTIFICATION I HEREBY CERTIFY THAT I HAVE NOT KNOWINGLY WITHHELD ANY INFORMATION THAT MIGHT ADVERSELY AFFECT MY CHANCES FOR EMPLOYMENT AND THAT THE ANSWERS GIVEN BY ME ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I FURTHER CERTIFY THAT I, THE UNDERSIGNED APPLICANT, HAVE PERSONALLY COMPLETED THIS APPLICATION. I UNDERSTAND THAT ANY OMISSION OR MISSTATEMENT OF MATERIAL FACT ON THIS APPLICATION OR ON ANY DOCUMENTS USED TO SECURE EMPLOYMENT SHALL BE GROUNDS FOR REJECTION OF THIS APPLICATION OR FOR IMMEDIATE DISCHARGE IF I AM EMPLOYED, REGARDLESS OF THE TIME ELAPSED BEFORE DISCOVERY.
- REFERENCES I HEREBY AUTHORIZE THE COMPANY TO THOROUGHLY INVESTIGATE MY REFERENCES, WORK RECORDS, EDUCATION AND OTHER MATTERS RELATED TO MY SUITABILITY FOR EMPLOYMENT AND, FURTHER, AUTHORIZE MY CURRENT AND FORMER EMPLOYERS TO DISCLOSE TO THE COMPANY ANY AND ALL LETTERS, REPORTS AND OTHER INFORMATION PERTAINING TO MY EMPLOYMENT WITH THEM, WITHOUT GIVING ME PRIOR NOTICE OF SUCH DISCLOSURE. IN ADDITION, I HEREBY RELEASE THE COMPANY, MY CURRENT AND FORMER EMPLOYERS, AND ALL OTHER PERSONS, CORPORATIONS, PARTNERSHIPS AND ASSOCIATIONS FROM ANY AND ALL CLAIMS, DEMANDS OR LIABILITIES ARISING OUT OF OR IN ANY WAY RELATED TO SUCH INVESTIGATION OR DISCLOSURE.
- AT WILL EMPLOYMENT I UNDERSTAND THAT NOTHING CONTAINED IN THE APPLICATION OR CONVEYED TO ME DURING ANY INTERVIEW WHICH MAY BE GRANTED IS INTENDED TO CREATE AN EMPLOYMENT CONTRACT, IMPLIED OR EXPLICIT, BETWEEN ME AND THE COMPANY. IN ADDITION, I UNDERSTAND AND AGREE THAT IF I AM EMPLOYED, MY EMPLOYMENT RELATIONSHIP WITH THE COMPANY IS STRICTLY VOLUNTARY AND AT OUR MUTUAL WILL. I UNDERSTAND THAT IF EMPLOYED, MY EMPLOYMENT IS FOR NO DEFINITE OR DETERMINABLE PERIOD AND MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT PRIOR NOTICE, WITH OR WITHOUT CAUSE OR REASON, AT THE OPTION OF EITHER MYSELF OR THE COMPANY, AND THAT NO PROMISES OR REPRESENTATIONS CONTRARY TO THE FOREGOING ARE BINDING ON THE COMPANY UNLESS MADE IN WRITING AND SIGNED JOINTLY BY A PRINCIPAL OF THE COMPANY, A DEPARTMENT MANAGER AND MYSELF.
- ARBITRATION OF DISPUTES FURTHERMORE, IF EMPLOYED, I AGREE THAT ANY DISPUTE ARISING OUT OF THE TERMINATION OF OUR EMPLOYMENT RELATIONSHIP SHALL BE RESOLVED PURSUANT TO MANDATORY BINDING ARBITRATION AT THE WRITTEN REQUEST OF EITHER THE COMPANY OR MYSELF. THIS AGREEMENT PROVIDES THAT SUCH ARBITRATION SHALL COMPLY WITH AND BE GOVERNED BY THE RULES OF THE JUDICIAL ARBITRATION AND MEDIATION SERVICES, AND THAT ANY ARBITRATION AWARD ARISING FROM SUCH DISPUTE SHALL BE LIMITED TO BACK PAY ONLY.
 - I UNDERSTAND AND AGREE THAT ANY FUTURE CHANGES IN MY TITLE, DUTIES, COMPENSATION, WORKING CONDITIONS, AND/OR COMPANY BENEFITS, POLICIES AND PROCEDURES WILL NOT ALTER OUR AT-WILL AND ARBITRATION AGREEMENTS.
- **PROOF OF LEGAL RIGHT TO WORK -** I UNDERSTAND THAT IF OFFERED EMPLOYMENT, I WILL, AS A CONDITION OF EMPLOYMENT, BE REQUIRED TO SUBMIT PROOF OF MY IDENTITY AND LEGAL RIGHT TO WORK IN THE UNITED STATES ON MY FIRST DAY OF EMPLOYMENT.
- VALID DRIVER'S LICENSE IF THE POSITION APPLIED FOR REQUIRES DRIVING IN THE COURSE OF WORK, I UNDERSTAND THAT I WILL BE REQUIRED TO POSSESS A CURRENT AND VALID DRIVER'S LICENSE AND UNDERSTAND THAT I WILL BE REQUIRED TO PROVIDE A COPY OF MY OFFICIAL DRIVING RECORD AND PROOF OF INSURANCE. I ALSO UNDERSTAND THAT ANY OFFER OF EMPLOYMENT IS CONTINGENT ON MY ABILITY TO BE COVERED BY THE COMPANY'S AUTO INSURANCE, IF REQUIRED FOR MY POSITION.
- **EQUAL OPPORTUNITY EMPLOYMENT** THE COMPANY IS AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE IN EMPLOYMENT. NO QUESTION ON THIS APPLICATION IS USED FOR THE PURPOSE OF LIMITING OR EXCLUDING ANY APPLICANT'S CONSIDERATION FOR EMPLOYMENT ON A BASIS PROHIBITED BY LOCAL, STATE OR FEDERAL LAW.

PROHIBITED BY LOCAL, STATE OR FEDERAL LA	AW.
SIGNATURE OF APPLICANT:	DATE: