

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, genetic information or any other status protected by law or regulation. It is our intention that all qualified applicants are given equal opportunity and that selection decisions be based on job-related factors.

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. PLEASE PRINT, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information. Today's Date Job Applied for ____ Are you seeking: Full-time Part-time Temporary ☐ employment? When could you start work? Desired Wage \$______ Last Name First Name Middle Name Telephone Number Present Street Address City State Zip Code Are you 18 years of age or older? Yes No \square (If you are hired, you may be required to submit proof of age.) Have you ever applied here before? Yes If yes, when? No 🗌 No 🗌 If yes, when? Were you ever employed here? Yes Have you ever been convicted of any law violation? If yes, give details (A conviction will not necessarily disqualify an applicant for employment.) If employed, do you expect to be engaged in any additional business or employment outside of our job?..... Yes No □ If yes, give details___ For Driving Jobs Only: Do you have a valid driver's license? Yes Class of License _____ State Licensed In Driver's License Number Have you had your driver's license suspended or revoked in the last 3 years? Yes No □ If yes, give details:_ List professional, trade, business or civic activities and offices held. (Exclude labor organizations and memberships which reveal race, color, religion, national origin, sex, age, disability, genetic information or other protected status.) _____ Number of Diploma/ Subjects LIST NAME AND ADDRESS OF SCHOOLS Degree/ Certificate High School or GED: U College or University: ____ Α Vocational or Technical: ___ What skills or additional training do you have that relate to the job for which you are applying? 0 Ν What machines or equipment can you operate that relate to the job for which you are applying? _____

WORK H-STORY	List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references. Note: A job offer may be contingent upon acceptable references from current and former employers.					
	NAME OF EMPLOYER		JOB TITLE AND DUTIES			
	ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM	ТО		
	CITY, STATE, ZIP CODE		Reason For Leaving			
	SUPERVISOR(S)	TELEPHONE				
	NAME OF EMPLOYER		JOB TITLE AND DUTIES			
	ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM	ТО		
	CITY, STATE, ZIP CODE		Reason For Leaving			
	SUPERVISOR(S)	TELEPHONE				
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	ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM	ТО		
	CITY, STATE, ZIP CODE		Reason For Leaving			
	SUPERVISOR(S)	TELEPHONE				
O T H E R	Have you worked or attended school under any other names If yes, give names:		?	Yes 🗌	No 🗌	
	Are you presently employed?			Yes 🗌	No 🗌	
	Have you ever been fired from a job or asked to resign?			Yes 🗌	No 🗌	
DI FACE DEAD FACH CTATEMENT CADEFULLY REFORE CICNING						
consauth make screen empty may I UN CONTO EMPTOR	sideration for employment and may resu norize, whether listed or not, any persor ting a hiring decision. I release such persor tening examination. I hereby consent to ployment it may be conditioned upon my to be deemed necessary to judge my capa NDERSTAND THAT THIS APPLICATION NTRACT OF EMPLOYMENT NOR GUARA ENTER INTO AN AGREEMENT OF EMP	employment application is true and count in my dismissal if discovered at a later n, school, current employer, past emplosons and organizations from any legal lia a pre- and/or post-employment drug sor successfully passing a complete pre-enability to do the work for which I am apply, VERBAL STATEMENTS BY MANAGE INTEE EMPLOYMENT FOR ANY DEFINIT LOYMENT FOR ANY SPECIFIED PERIOD THAT I HAVE BEEN HIRED AT THE WIOUT NOTICE.	MENT CAREFULLY BEFORE SIGNING mplete. I understand that any false information or omission in date. I authorize the investigation of any or all statements conf objects and organizations to provide relevant information and of ability in making such statements. I understand I may be requir een as a condition of employment, if required. I understand th apployment physical examination. I consent to the release of an ying. MENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREAT TE PERIOD OF TIME. ONLY THE PRESIDENT OF THE ORGANI D AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED E LL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TER	tained in this applica ppinions that may be red to successfully para tif I am extended by or all medical information TE AN EXPRESS OF ZATION HAS THE ALL 3Y THE PRESIDENT	tion. I also e useful in ass a drug an offer of rmation as R IMPLIED UTHORITY AND THE	
Signature: Date:						
	This application for employment will remain active for a limited time. Ask the organization's representative for details.					