

# Application for Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

*Please Print*

Position Applied For:	Date of Application:
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How did you learn about us?  Advertisement  ESC  Relative  Friend  Inquiry  Website  Other

Last Name	First Name	Middle Name	
Street Address		Mailing Address	
City	State	Zip	
Primary Contact Number	Home Phone	Mobile Phone	Work Phone

**Best time to contact you?**  A.M  P.M. **Have you applied with us before?**  Yes  No When? \_\_\_\_\_

**Have you been employed with us before?**  Yes  No When? \_\_\_\_\_

**Do you know any friends or relatives that work here?**  Yes  No

**Are you currently employed?**  Yes  No **May we contact your employer?**  Yes  No

**Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?** *Proof of citizenship or immigration status will be required upon employment.*  Yes  No

**Date available for work** \_\_\_\_\_ **Desired salary range** \_\_\_\_\_

**Are you available to work:**  Full Time  Part Time  Temporary **Shifts?**  1st  2nd  3rd

**Are you currently on 'lay-off' status and subject to recall?**  Yes  No

**Can you travel?**  Yes  No

Education	Name and Address of School	Course of Study	Years	Completed?
Elementary School				
High School				
Undergraduate				
Graduate				
Label				
Other (Specify)				

**Describe any specialized training apprenticeship, skills and extra-curricular activities.**

**Describe any job-related training received in the United States military.**

**List professional, trade, business or civic activities and office held.** *You may exclude membership which would reveal gender race, religion, national origin, age, ancestry, disability or other protected status.*

**Other Qualifications** *Summarize special job-related skills and qualifications acquired from employment or other experience.*

**State any additional information you feel may be helpful to us in considering your application.**

**Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.**

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.

Yes  No

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer		Dates Employed		
Address		Starting Salary	Ending Salary	
Telephone Numbers		Duties Performed		
Job Title	Supervisor			
Reason for Leaving				

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Reference Name	Contact Number(s)
Address	

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Address	

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Address	

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at any employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an 'at will' nature., which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this 'at will' employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date