



# APPLICATION FOR EMPLOYMENT

## An Equal Opportunity Employer

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

### Personal

Social Security No. \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Present address \_\_\_\_\_ Telephone no. \_\_\_\_\_  
No. Street City State Zip

Position applied for \_\_\_\_\_ Rate of pay expected \$ \_\_\_\_\_ per week

Would you work \_\_\_\_\_ Full-time \_\_\_\_\_ Part-time Specify days and hours if part-time \_\_\_\_\_

Were you previously employed by this organization? \_\_\_\_\_ If yes, when? \_\_\_\_\_

List any friends or relatives working here, other than spouse \_\_\_\_\_  
(Names)

If your application is considered favorably, on what date will you be available for work? \_\_\_\_\_ 20\_\_\_\_

Are there any other work experiences, skills, or qualifications that you feel would especially fit you for work here? Please add any additional  
comments you think are important for us to consider. \_\_\_\_\_

If you are applying for a job with minimum age requirements, you may be required to submit proof of age.  
For jobs with minimum age requirements:

Date of birth: \_\_\_\_\_

For driving jobs only: Do you have a valid driver's license? ..... ☐ yes ☐ no

Driver's license number \_\_\_\_\_ Class of license \_\_\_\_\_

If hired, can you furnish proof you are eligible to work in the United States? ..... ☐ yes ☐ no

Have you ever been convicted of a felony? ..... ☐ yes ☐ no

A "yes" answer does not automatically disqualify you from employment since the nature of the offence, date, and the job for which you are applying will be considered.

If yes, please explain \_\_\_\_\_

Have you previously applied here? ..... ☐ yes ☐ no

If yes, when? \_\_\_\_\_

Have you worked for any firm under a different name? ..... ☐ yes ☐ no

If yes, give name \_\_\_\_\_

**Work History (begin with the most recent, list all past employers, including any pertinent military experience)**

Name of Company	Business address	City	State	Phone no.
Type of business	Immediate supervisor		Date employed From To	
Exact job title	Earning at hire	At termination	Reason for termination	
Description of duties				

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**Affidavit**

I certify that the answers given by me to the foregoing questions and statements are true and correct without consequential omissions made by me in this questionnaire. I also authorize the companies, schools or persons named above to give any information regarding my employment, character and qualifications. I hereby release said companies, schools or persons from all liability for any damage for issuing this information. I understand that there is no express or implied contract of employment and that if employed I have been hired at the will of the employer and that my employment may be terminated at will, at any time; and with or without cause the employer's only obligation being to pay salary or wages due and owing at the time of termination. Finally, I understand that all company property must be returned and my indebtedness to the company must be paid before my termination. I authorize the company to deduct from the final paycheck(s) all monies due and owing to the company.

Signature \_\_\_\_\_ Date \_\_\_\_\_