



EMPLOYMENT APPLICATION

Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status.

(Please Print)

Date of Application: _____

Position(s) Applied For: _____

Name: _____

Last

First

Middle

Address: _____

Street/Box

City

State

Zip

Phone #: _____ Social Security #: _____

Have you filed an application here before: Yes ___ No ___ Date _____

Have you been employed here before? Yes ___ No ___ Date _____

Are you over 18 years old? Yes ___ No ___

Do you have a valid driver's license? Yes ___ No ___

Are you a citizen of the United States Yes ___ No ___

Are you available to work, Full Time ___ Part Time _____

Have you in the past or present been in criminal court? Yes ___ No ___

If sp. Please indicate:

Are you presently employed? Yes ___ No ___

Employer

Address

Job Title

Supervisor

Reason for Leaving

Dates Employed: From – To

Hourly Rate/Salary (Starting and Final)

Work Performed

REFERENCES:

List Name, Address and Phone Number of three (3) references not related to you.

Name	Address	Phone #
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Name	Address	Phone #
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Name	Address	Phone #
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State any additional information you feel may be helpful to us in considering your application:

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In the event of employment, I understand that false misleading information given in my application or interview may result in discharge. I also am giving my permission to perform a background check of any and all of my records. I understand I will be required to have a pre-employment physical examination including drug testing and I will be subject to random drug testing if employed.

Signature

Date