



**APPLICATION FOR EMPLOYMENT
(PLEASE PRINT CLEARLY)**

DATE: _____

NAME: _____
Last Name First Name Middle Name

Are you at least 18 years of age? **Yes** **No**

Present Address: _____

Telephone No. (____) _____ How many years have you lived at this address? _____

Previous Address: _____

How many years have you lived at this address? _____

If hired, can you present evidence of U.S. Citizenship or your Legal Right to live and work in this Country? **Yes** **No**

Job(s) applied for **1.** _____ Rate of pay expected \$ _____ per _____
2. _____ Rate of pay expected \$ _____ per _____

If you are applying for a Driver's position please list your valid Driver's License # and State: _____

Type of Employment desired: **1st shift** **2nd shift** **3rd shift** **Full Time** **Part Time**

How did you learn of this opening? _____

Have you worked for us before? **Yes** **No** If yes, when? _____

List any friends or relatives working for us: _____

If hired, on what date will you be available to start work? _____

Are you employed now? **Yes** **No** If so, may we inquire of your present employer? **Yes** **No**

If hired, do you have a reliable means of transportation to get to work? **Yes** **No**

Have you ever been convicted of a crime, excluding misdemeanors and summary offenses? **Yes** **No** If yes, describe in full: _____

Answering "YES" to this does not constitute an automatic bar employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Person to be notified in case of an accident or emergency	
Name: _____	Phone Number (____) _____
Address: _____	

PERSONAL REFERENCES

(Excluding Former Employers or Relatives)

Name and Occupation	Address	Phone Number
1. _____	_____	(____) _____
2. _____	_____	(____) _____
3. _____	_____	(____) _____

PRIOR WORK HISTORY (LIST IN ORDER, LAST OR PRESENT EMPLOYER FIRST)

PLEASE GIVE MONTH AND YEAR – DO NOT REFERENCE YOUR RESUME

DATES		NAME AND ADDRESS OF EMPLOYER	RATE OF PAY		SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING
FROM	TO		START	FINISH		
Describe in detail the work you did.						

DATES		NAME AND ADDRESS OF EMPLOYER	RATE OF PAY		SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING
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FROM	TO		START	FINISH		
Describe in detail the work you did.						

May we contact the employers listed above? Yes No If not, indicate below which one(s) you do not wish us to contact:

EDUCATIONAL BACKGROUND

TYPE OF SCHOOL	NAME & ADDRESS	HOW MANY YEARS ATTENDED	GRADUATED	COURSE or MAJOR
GRAMMER or GRADE				
HIGH SCHOOL				
COLLEGE				
POST GRADUATE				
BUSINESS or TRADE				
OTHER				

If hired, are you able to perform all the tasks required by the job you are applying for with or without reasonable accommodations?

YES NO

Would you be willing and able to operate in narrow work space conditions? **YES NO**

Are you able to lift up to 40 lbs. frequently for at least four to five hours per day **YES NO**

Are there any responsibilities or commitments that would prevent you from meeting work schedules? **YES NO**

If yes, explain: _____

Please list languages you fluently speak or write: _____

Please indicate your anticipated term of employment: _____

Occasionally the form of an application blank makes it difficult for an individual to adequately summarize their complete background. Please use the space below to summarize any other experience, skills or qualifications which you feel would especially fit you for the position.

Thank you for completing this application form and for your interest in employment with us. We would like to assure you that your opportunity for employment with this company will be based only on your merits and qualifications.

**PLEASE READ CAREFULLY
APPLICANT'S CERTIFICATION AND AGREEMENT**

I hereby certify that the answers given in this application for employment are true and correct to the best of my knowledge. I authorize such inquiry into the statements made in this application as may be necessary in reaching an employment decision. I understand that any false or misleading information given in this application or during a pre-employment interview, including failure to disclose requested information, may result in my discharge.

I understand that any employment relationship with this employer is "at-will," which means that that employee may resign at any time and/or the employer may discharge the employee at any time, with or without cause.

I also understand that I will be required to pass a drug test, before a final offer of employment is made. By signing my name below, I consent to these procedures.

Signature of Applicant: _____ Date: _____
