



Employment Application

This application is not an employment contract, but is intended to evaluate suitability for employment. It is the policy of the company to provide equal employment to all qualified persons without discrimination on the basis of sex, race, color, religion, age, marital status, national origin, citizenship, disability, veteran status, or any other status protected under state and federal law. It is also the policy of the company to have the option of conducting background information checks. Once a job offer is made, employment may be contingent upon a successful completion of a medical examination, which may include providing body substance samples.

Personal Information

Last Name	First Name	Middle	Driver License # and State		Social Security #
Home Phone	Work Phone	Emergency Contact	Relationship		Emergency Contact Phone
Current Address		City	State	Zip	Since (Mo/Yr)
Previous Address		City	State	Zip	Since (Mo/Yr)

Education

High School Attended	City, State	Diploma?
College or Trade School Attended	City, State	Degree/Certificate/Diploma

Employment Information

Position Applied For	Full-Time or Part-Time	Desired Start Date	Desired Earnings	
1. Are you at least 16 years of age and legally eligible for work in the United States?		Yes	No	
2. Can you work weekends?		Yes	No	
3. Are you on layoff and subject to recall?		Yes	No	
4. Are you currently bound by a non-competition or trade secret agreement? (If yes, explain)		Yes	No	
5. Have you ever been discharged or asked to resign from a job? (If yes, explain)		Yes	No	
6. Have you ever been convicted of or pled guilty to a felony or other crime? (If yes, explain)		Yes	No	
7. Is your Driver's License current and valid?		Yes	No	
State _____ License # _____ Expiration Date _____				
8. May we contact your current or last employer?		Yes	No	
Company	Contact	Contact Phone		
9. Have you received or been made aware of the job description you are applying for?		Yes	No	
10. Do you understand the job requirements?		Yes	No	
11. Can you perform the requirements of this job with or without reasonable accommodation?		Yes	No	
12. Are you taking any medications which would interfere with your ability to perform safely?		Yes	No	

Applicant's Certification Agreement

1. I authorize the investigation of all statements contained in this application and release from all liability any persons or employers supplying such information. I also release the Company from all liability which might result from making the investigation.
2. I certify that the facts and information set forth in this application are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation or omission of facts on this application (or on any required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered.
3. I agree, if I am offered and accept a position, to conform to all existing and future Company rules, regulations and policies, and I understand that the Company reserves the right to change wages, hours and working conditions as deemed necessary. I also understand and agree that I may resign or be terminated with or without cause, and with or without notice, at any given time.
4. I understand that any employment offer is contingent upon my providing valid proof of identity and eligibility to work in order to comply with the Immigration Reform and Control Act of 1986.
5. I have read and reviewed the information provided in this application and the above statements. By signing this application for employment I certify that I understand all parts of it and have answered all questions completely and fully.

Signature of Applicant _____

Date _____