

Application for Employment

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, handicap or national origin.

PERSONAL INFORMATION

Date _____

Name _____

Present Physical Address _____

Permanent Mailing Address _____

Home Phone _____ Cell Phone _____ Email _____

EMPLOYMENT DESIRED

Position _____ Date you can start _____ Salary Desired _____

Are You Employed Now? _____ May we contact your current employer? _____

If you are under the age of 18, do you have a work permit? _____ Work Permit Number: _____

Have you ever applied or worked for this company before _____ When _____

Are you looking for Seasonal or Year-Round Work? _____

EDUCATION

High School Name _____ Last Year Completed _____

Address: _____

Did you attend College? _____ Name _____ Graduated: YES NO

Address _____

GENERAL

Subjects of Special Study or Research Work _____

Job Related Skills (computer, driver's license certifications, etc.) _____

EMPLOYMENT HISTORY

Please list current or past employment in chronological order. May we call references? _____

1. Date: From: _____ to: _____ Company Name/ Address _____

Position: _____ Supervisor: _____ Telephone: (_____) _____

Reason for leaving _____ Salary upon leaving _____

2 Date: From: _____ to: _____ Company Name/ Address _____

Position: _____ Supervisor: _____ Telephone: (_____) _____

Reason for leaving _____ Salary upon leaving _____

3. Date: From: _____ to: _____ Company Name/ Address _____

Position: _____ Supervisor: _____ Telephone: (_____) _____

Reason for leaving _____ Salary upon leaving _____

REFERENCES

1. Name: _____ Relationship: _____ Telephone: (____) _____
Address: _____ Years Acquainted _____

2. Name: _____ Relationship: _____ Telephone: (____) _____
Address: _____ Years Acquainted _____

3. Name: _____ Relationship: _____ Telephone: (____) _____
Address: _____ Years Acquainted _____

If you are to be hired by the company, you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.

AUTHORIZATION

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by the Company.

I understand that any employment is conditioned on a background check. I authorize the Company to thoroughly investigate all statements contained in my application or resume and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation to the Company, without giving me prior notice of such disclosures. In addition, I release the Company, any former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigations or disclosure.

I understand and agree that nothing contained in this application, or conveyed during my interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or the Company unless made in writing by an authorized Company representative.

If I am offered employment I agree to submit to a medical examination and drug test, if required, before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the Company and as permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclose to the Company the results of the examination, which results shall remain confidential and segregated from my personal life. I understand that my employment or continued employment, to the extent permitted by law is contingent upon satisfactory medical examinations and drug test, if required, and if I am hired a condition of my employment will be that I abide by the Company's Drug and Alcohol Policy.

I understand that acceptance of this form does not indicate there is a position open and does not obligate the Company to hire. If hired, I agree to abide by all Company work rules, policies and procedures. The company retains the right to revise it's policies or procedures, in whole or in part, at any time.

Applicant's Signature: _____ Date _____