

Application for Employment



Qualified applicants receive equal consideration. No question is asked for the purpose of excluding any applicant due to race, color, national origin, religion, age, sex, disability, veteran status, or any other characteristic protected under local, state or federal law. WE ARE AN EQUAL OPPORTUNITY EMPLOYER.

Name _____
Last First

M.I.

Street Address _____

City _____ State _____ Zip _____

Telephone _____ Social Security # _____

Type of work for which you wish to be considered _____

What source led you to make application with us? _____



Employment History

Please list your complete employment history. List present or most recent employer first. Use an additional page, if necessary.

Employer	Employed (mo./Yr.) From: To:	Type of work performed	Present or last salary	Reason for leaving
Address/City				
Name of Supervisor				
Employer	Employed (mo./Yr.) From: To:	Type of work performed	Present or last salary	Reason for leaving
Address/City				
Name of Supervisor				
Employer	Employed (mo./Yr.) From: To:	Type of work performed	Present or last salary	Reason for leaving
Address/City				
Name of Supervisor				

This is not legal advice. Employer should review this Application for Employment with local counsel prior to use, as each state has its own set of laws which relate to discrimination and hiring practices.

Education

Schools	Name/Location	Circle Last Yr. Completed	Major Courses	Diploma/Degree
High School		7 8 9 10 11 12		
College		1 2 3 4 more		
Business or Trade		Months Attended		

If you served in the United States Armed Forces, briefly describe the skills you acquired: _____

Personal Information

Are you legally authorized to work in the U.S.? Yes ... No ...

Note: you will be required to furnish documents to verify your eligibility for employment in accordance with the Immigration Reform and Control Act and your employment is contingent upon furnishing such documents.

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

Have you ever been convicted of a crime or are there any pending charges against you?

A conviction does not automatically bar you from employment)

Yes ... No ... If yes, include details _____

If you are an experience operator of any office machines or equipment, please list:

Typing speed _____ wpm

Short hand _____ wpm

Do you have any other skills you wish to mention? _____

Are you presently employed? Yes ... No ... If so, may we contact your present employer? Yes... No...

If hired, when would you be available? _____

What are your salary requirements? _____

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References

Name _____

Occupation _____

Address _____

City, State, Zip _____

Telephone Number _____

**For additional references, please attach a separate sheet.*

I certify that the answers given by me to the foregoing questions and statements are true and correct to the best of my knowledge without consequential omissions of any kind. I agree that the Company shall not be held liable in any respect if my employment is rejected or subsequently terminated because of false statements, answers or omissions made by me in this application. I understand that any misleading or incorrect statements may render this application void, and if employed, may lead to employment termination. I understand that a medical examination based on the requirements of the position for which I am being considered may be required, and drug testing may be included as part of the regular pre-employment physical. I also voluntarily and knowingly authorize the companies, schools or persons named above to give any information requested regarding my former employment, character and qualifications. I hereby voluntarily and knowingly fully release and discharge, absolve, indemnify, and hold harmless said companies, schools or persons from any and all liability for any damages for issuing this information, except for the malicious and willful disclosure of derogatory facts concerning my employment made for the express purpose of preventing me from obtaining employment, which the party disclosing such facts knows to be untrue. In consideration of my employment, I agree to conform to the rules and regulations of this organization. My employment and compensation can be terminated with or without cause and with or without notice, at any time, at the option of either my employer or myself.

Signature _____ Date _____

**APPLICATION LANGUAGE REGARDING
RIGHT TO WORK AND PILOT PROGRAM**

If you are hired, will you be able to provide documentation to verify that you are authorized to work on a full-time basis for all employers in the United States?

Yes_____ No_____

Please note: In its efforts to meet the law's requirements, this company is participating in the Basic Pilot program established by the Department of Homeland Security and the Social Security Administration (SSA) to aid employers in verifying the employment eligibility of all newly-hired employees. All documents provided to establish valid work authorization will be processed through this system.

**LENGUA DE APLICACION EN CUANTO A DERECHO
DE TRABAJAR Y PILOTAR PARTICIPACION**

Si usted es alquilado, sera capaz usted de proporcionar documention para verificar que usted esta autorizado a trabajar en una base a tiempo completo para todos los patrones en los Estados Unidos?

Si_____ No_____

Por favor note: En sus esfuerzos para encontrar las exigencias de la ley, esta compania participa en el programa Piloto Basico establecido por el Departamento de la Seguridad de Patria y la Administracion de Seguridad Social (SSA) para ayudar a patrones en la verificacion de la elegibilidad de empleo de todos los empleados recién alquilados. Todos los documentos proporcionados para establecer autorizacion de trabajo valida seran tratados por este sistema.