Employment Application Last Name, First Initial: **Personal Information** Name (Last, First, MI) Street address City, State, Zip Home phone number Work phone number Facsimile number E-mail address Social security number Driver's license number/state/expiration (if job involves any driving) **Employment Desired** Position applied for How did you hear about this position? Date available for work Desired hours (full time, part time, etc.) **Education** Name and Address of Course of **Total Years** Degree/ of Study Diploma School Study High Today's Date School Undergraduate College Graduate/ Professional Other (Specify) List any seminars, classes or other education not listed above which may help qualify you for this position (if you need additional space, please use page 7):

Employment Appli	ication			
mployment History				
ist below present and past en l periods of unemployment. e contact your current emplo	You must compl	ete this sect		
Employer (current ☐ Yes ☐	No)	Start Date	End Date	Essential job functions of final position
Address				1.
City, State, Zip		Starting Salary	Ending Salary	2.
Phone number	Phone number			3.
Fax number	Superviso	r(s)		4.
Job position(s)				
Employer		Start Date	End Date	Essential job functions of final position
Employer Address		Start Date	End Date	Essential job functions of final position 1.
1 7			Date Ending	final position
Address		Date Starting	Date	final position 1. 2.
Address City, State, Zip	Superviso	Date Starting Salary	Date Ending	final position 1. 2. 3.
Address City, State, Zip Phone number	Superviso	Date Starting Salary	Date Ending	final position 1. 2.
Address City, State, Zip Phone number Fax number	Superviso	Date Starting Salary	Date Ending	final position 1. 2. 3.
Address City, State, Zip Phone number Fax number Job position(s)	Superviso	Date Starting Salary	Date Ending	final position 1. 2. 3.
Address City, State, Zip Phone number Fax number Job position(s)	Superviso	Date Starting Salary	Date Ending	final position 1. 2. 3.

[PLEASE CONTINUE ON NEXT PAGE]

Employment Application

Employment History

3.	Employer		Start	End	Essential job functions of
			Date	Date	final position
	Address				
					1.
	City, State, Zip		Starting	Ending	
			Salary	Salary	2.
	Phone number				
					3.
	Fax number	Supervisor	r(s)		
					4.
	Job position(s)				
	Reason(s) for leaving	<u>.</u>			

4.	Employer		Start	End	Essential job functions of
			Date	Date	final position
	Address				_
					1.
	City, State, Zip		Starting	Ending	
			Salary	Salary	2.
	Phone number				
					3.
	Fax number	Supervisor	r(s)		
					4.
	Job position(s)				

Reason(s) for leaving

[PLEASE CONTINUE ON NEXT PAGE]

Employment Applic	ation			
Additional Information				
Have you ever been employed v If Yes, when?	vith this company before?		☐ Yes	□ No
Do you have any friends or relatives employed by this company? If Yes, please provide their names and relationship to you:			☐ Yes	□ No
Are you currently employed? May we contact your employer? Are you currently on "lay off" status and subject to recall? If you are under 18 years of age, can you provide proof of your eligibility to				□No □ No □ No □ No
work? If hired, can you provide proof of U.S. citizenship or proof of your legal right to work in the U.S.?			□ Yes	□ No
Are you able to perform all of the essential functions of the job for which you are applying with or without reasonable accommodation? If hired, are there any accommodations the company would need to provide so that you can perform all those essential functions and duties of the position being applied for? If Yes, please explain:			☐ Yes ☐ Yes	□ No
If driving is a requirement of the years been convicted of Driving	☐ Yes	□ No		
If hired, do you have a reliable means of transportation to and from work? If hired, would you be able to travel or work overtime as needed? Have you ever been convicted of a felony or misdemeanor?			☐ Yes	□ No
If Yes, please explain:	a reiony or misdemeanor?		☐ Yes	□ No
References List below two persons not related to y	vou who have knowledge of your work p	performance with	in the last 5	years
Name Occupation				
Company name	Address	L		
Telephone	E-mail	Relationship &	years acqua	ninted
Name		Occupation		
Company name	Address			
Telephone E-mail Relationship &			z years acquainted	

Employment Application

Please read each statement closely and initial each acknowledging your understanding

Equal Employment Opportunity Statement

This company is committed to the principles of equal employment opportunity and is committed to make employment decisions based on merit. We are committed to complying with all Federal, State and local laws providing for equal employment opportunities, as well as all laws related to terms and conditions of employment. The Company desires to maintain a work environment that is free of sexual harassment and discrimination due to race, religion, color, national origin, physical or mental disability, age or any other status protected by Federal, State or local laws. The Company will make reasonable efforts to accommodate those physical or mental limitations of an otherwise qualified employee unless undue hardship would result for the company.

Discrimination and Sexual Harassment Policy Statement

This Company will not tolerate any form of unlawful discrimination, including sexual harassment. Any employee who engages in unlawful discrimination or sexual harassment will be subject to appropriate discipline, up to and including termination. Prohibited sexual harassment is defined as follows: Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature constitutes sexual harassment when (1) submission to such conduct is made whether explicitly or implicitly a term or condition of an individual's employment; (2) Submission to or action of such conduct by an individual is used as the basis for employment decisions affecting such individuals; or (3) Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive work environment.

Disclosure to Applicants Concerning Drug/Alcohol Testing

If you are offered a position with the Company, you may be given a drug/alcohol test as a condition of employment. Your refusal to timely submit to a drug/alcohol test or your failure to pass such a test means you will not be employed by this company. Neither the collector of specimens nor the medical professional who reviews the test results will be a company employee. The test results will be kept confidential. The individual undergoing testing will not be directly observed while providing the specimen unless there are reasonable grounds to believe the individual may alter or substitute the specimen. Negative test results are required as a condition of employment.

Complete and Accurate Information

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application, or any other document used to secure employment, shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

 At-Will Employment I understand and agree that if I am employed, my the Company may terminate the employment rela with or without notice. Likewise, the Company wi at any time, with or without cause and with or wit representation, whether expressed or implied to promise or representation contrary to the foregoi writing and signed by the Company's president.	tionship at any time, with or without cause and Il respect my right to terminate my employment hout notice. I further understand that any prior the contrary is hereby superceded and that no
 Testing Authorization If offered a position with the Company, I her psychological, skill, drug or medical test required b	
 Investigation Authorization I authorize investigation into all statements and investigation may include credit, driving, crimina checks. By applying for this job, I also authorize per criminal background.	l background, references and other background
 Company Obligation I understand and agree that the Company's accept position for which I am qualified is open (unless sp to hire me. I understand that the Company is a accepting this completed application.	ecifically posted) or that the company has agreed
I HAVE READ AND UNDERSTAND THE AE TO BE BOUND BY THEM IF EMPLOYED BY T	
Signature	Date