

## APPLICATION FOR EMPLOYMENT

To The Applicant. We appreciate your interest in our entity and assure you that we are interested in your qualifications. A clear understanding of your background and work history will aid us in seeking to place you in a position which, in our judgment, best meets your qualifications.

We are an equal opportunity employer and shall consider qualified applicants for all positions without regard to race; color; sex; religion; national origin; age; height; weight; marital or veteran status; or disability.

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### PERSONAL

Name \_\_\_\_\_ Date of Application \_\_\_\_\_  
(Last) (First) (Middle)

Address \_\_\_\_\_ Telephone No. \_\_\_\_\_  
(Number) (Street) (City/State) (Zip)

Social Security No. \_\_\_\_\_ Are you 18 years or older? Yes \_\_\_ No \_\_\_

Are you authorized to work in the United States? Yes \_\_\_ No \_\_\_

Have you been previously employed here? Yes \_\_\_ No \_\_\_ If yes, date(s) \_\_\_\_\_

Supervisor Name(s)  
\_\_\_\_\_

Have you filed an application before? Yes \_\_\_ No \_\_\_ If yes, date(s)  
\_\_\_\_\_

List any friends or relatives working here:  
\_\_\_\_\_  
\_\_\_\_\_

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### EMPLOYMENT DESIRED

Position(s) applied for:  
\_\_\_\_\_

Kind of work sought: Full time \_\_\_ Part time \_\_\_ Other  
\_\_\_\_\_

If part-time, please specify hours and days desired:  
\_\_\_\_\_  
\_\_\_\_\_

Salary Desired: \_\_\_\_\_

Date available to work \_\_\_\_\_

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### MILITARY SERVICE RECORD

Have you had any experience in the Armed Forces of the United States or in a State National Guard?  
Yes \_\_\_ No \_\_\_

Is yes, what branch? \_\_\_\_\_

Rank at Discharge \_\_\_\_\_

Are you in the reserves? Yes \_\_\_ No \_\_\_  
 If yes, date obligation ends \_\_\_\_\_

Special/technical training \_\_\_\_\_

**EMPLOYMENT EXPERIENCE (List current or most recent job first)**

<b>1</b>	Employer	Dates From                      To	Work Performed
	Address		
	Job Title	Hourly Rate/Salary Starting                      Final	
	Supervisor		
	Reason for Leaving		
<b>2</b>	Employer	Dates From                      To	Work Performed
	Address		
	Job Title	Hourly Rate/Salary Starting                      Final	
	Supervisor		
	Reason for Leaving		
<b>3</b>	Employer	Dates From                      To	Work Performed
	Address		
	Job Title	Hourly Rate/Salary Starting                      Final	
	Supervisor		
	Reason for Leaving		
<b>4</b>	Employer	Dates From                      To	Work Performed
	Address		
	Job Title	Hourly Rate/Salary Starting                      Final	
	Supervisor		
	Reason for Leaving		

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**EDUCATION**

	Name/Location	Years Completed	Diploma Degree	Courses of Study
<b>Elementary</b>				
<b>High School</b>				
<b>College</b>				
<b>Graduate</b>				
<b>Vocation/Training</b>				

Any other educational training:

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**REFERENCES** *(Do not include relatives or former employers)*

	Name	Address	Phone Number	Years Acquainted
<b>1</b>				
<b>2</b>				
<b>3</b>				

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**ADDITIONAL INFORMATION**

Have you ever been convicted of a crime?<sup>2</sup> Yes \_\_\_\_ No \_\_\_\_

If so, where, when and nature of offense

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Do you have a valid driver's license? Yes \_\_\_\_ No \_\_\_\_ License No. \_\_\_\_\_

State \_\_\_\_\_ (This is only applicable if the position you are applying for requires driving)

List professional, trade, business or civic activities and offices held, excluding groups the name or character of which indicates race; color; sex; religion; national origin; age; marital or veteran status; disability

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State any additional information that you feel may be helpful to us in considering your application.

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**AUTHORIZATION AND UNDERSTANDING**

**READ CAREFULLY BEFORE SIGNING**

**At-Will Employment Status**

**I AGREE THAT EITHER PARTY MAY TERMINATE THE EMPLOYMENT RELATIONSHIP, WITH OR WITHOUT CAUSE, AT ANY TIME, FOR ANY REASON, AND I FURTHER AGREE THAT THIS ARRANGEMENT MAY ONLY BE CHANGED BY THE ENTITY REPRESENTATIVE, IN WRITING, DIRECTED TO ME PERSONALLY, AND SIGNED BY THE ENTITY REPRESENTATIVE.**

I agree that I shall be bound by the other rules, policies, regulations, and terms and conditions of employment of the entity as they are from time to time changed and that no additional obligations can be imposed by me on the entity except those which have been acknowledged, in writing, by the Entity Representative or his/her designated representative. This provision shall be freely effective and binding on me at all times except during the specific time periods that I am subject to a written Labor Contract between the Company and a Union, and during those specific time periods the Union Labor Contract shall govern my employment.

I also agree that if I am hired for a position that requires driving for the entity then I agree to an annual review of my State Motor Vehicle Record.

I further agree that my employment is conditional upon satisfactory completion of documentation as required by the Immigration Reform and Control Act of 1986 and until such time as the results of my pre-employment physical (if such physical is required) is known.

\_\_\_\_\_

Date Signature

<sup>2</sup> Yes to this question does not necessarily disqualify an applicant for a entity position.