

APPLICATION FOR EMPLOYMENT

FOR OFFICE USE ONLY	
Work Location	Rate
Position	Date

This company will upon hiring perform post-offer physical screen exam which will include a drug test

Date _____

PERSONAL

To Applicant: We deeply appreciate your interest in our organization and assure you that we are sincerely interested in your qualifications. A clear understanding of your background and work history will aid us in placing you in the position that best meets your qualifications and may assist us in possible future upgrading.

*The Civil Rights Act of 1964 prohibits discrimination in employment practices because of race, color, religion, sex, or national origin. PL 90-202 prohibits discrimination because of age.

If the city or state in which you are applying for a position prohibits the request of any information on this form the item(s) may be omitted.

(PLEASE PRINT CLEARLY)

Name _____ Social Security No. _____
Last First Middle Initial

Present Address _____ Telephone No. _____
No. Street City State Zip

How long have you lived at above address? _____ Are you a citizen of the U.S.A.? _____

Previous Address _____ How long did you live there? _____
No. Street City State Zip

Date of Birth _____ Sex M _____ F _____ Height _____ ft _____ in Weight _____ lbs
Month Day Year

Number of dependents including yourself _____ Number of children _____ Their ages _____

Can you lift 80 pounds on a regular basis? _____ If no, describe _____

Would you work Full-Time? _____ Rate of pay expected \$ _____ per week

Were you previously employed by us? _____ If yes, when? _____

List any friends or relatives working for us: _____

Name

Name

Have you received compensation for injuries? _____ If yes, describe _____

If your application is considered favorably, on what date will you be available for work? _____

Person to be notified in case of accident or emergency:

Name _____ Address _____

Phone Number _____

Are there any other experiences, skills, or qualifications which you feel would especially fit you for work with our company?

EDUCATION

Encircle last year completed

Describe any other training or education _____

Elementary School 5 6 7 8

High School 1 2 3 4

College 1 2 3 4

List below all present and past employment, beginning with your most recent

Name and Address of Company and Type of Business	From		To		Describe in detail the work you did	Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.					

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The facts set forth above in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice.

We are an "at-will employer." The applicant understands that if hired, employment can be terminated by either employer or employee with or without cause and with or without notice.

Signature of Applicant