

# Application for Employment

PLEASE PRINT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position Applied For: \_\_\_\_\_ Date of Application: \_\_\_\_\_

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Phone No. : \_\_\_\_\_ Alternate Phone No.: \_\_\_\_\_

If you are under 18, and it is required, can you furnish a work permit?      Yes      No

If no, please explain \_\_\_\_\_

Have you been employed here before? If yes, give dates and positions: \_\_\_\_\_

Are you legally eligible for employment in this country?      Yes      No

Date available for work: \_\_\_\_ / \_\_\_\_ / \_\_\_\_      What is your desired salary range? \$ \_\_\_\_\_

Are you able to meet the attendance requirements of the position?      Yes      No

Have you ever pled guilty or no contest to, or been convicted of a crime?      Yes      No

If yes, please provide dates and details: \_\_\_\_\_

ANSWERING YES TO THESE QUESTIONS DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT. FACTORS SUCH AS DATE OF THE OFFENSE, SERIOUSNESS AND NATURE OF THE VIOLATION, REHABILITATION AND POSITION APPLIED FOR WILL BE TAKEN INTO ACCOUNT.

Driver's license number if driving is an essential job function: \_\_\_\_\_ State: \_\_\_\_\_

## Employment History

Provide the following information of your past four (4) employers, assignments of volunteer activities, starting with the most recent.

Employer name and address:	Position title/duties, skills:	Start date:	End date:
		Reason for leaving:	
Pay: \$	Supervisor:      Telephone:		
Per:      \$			
Employer name and address:	Position title/duties, skills:	Start date:	End date:
		Reason for leaving:	
Pay: \$	Supervisor:      Telephone:		
Per:      \$			
Employer name and address:	Position title/duties, skills:	Start date:	End date:
		Reason for leaving:	
Pay: \$	Supervisor:      Telephone:		
Per:      \$			
Employer name and address:	Position title/duties, skills:	Start date:	End date:
		Reason for leaving:	
Pay: \$	Supervisor:      Telephone:		
Per:      \$			

## Skills and Qualifications

Summarize any training, skills, licenses and/or certificates that may qualify you as being be to perform job-related functions in the position for which you are applying: \_\_\_\_\_

## Educational Background

Name and Location	Number of Years Completed	Did You Graduate		Course of Study
High School				
College		Major	Degree	
Other				

## References

Name	Phone Number	Number of Years Known

## Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct. I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient to cause to cancel further consideration of this application or immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in the employment and no question on his application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment if at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period of definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_