EMPLOYMENT APPLICATION

Conditions of employment are stated at the end of this form. Please read carefully before you sign this application (Application must be completed in full even if attaching a resume.)

POSITION APPLIED FOR		DESIRED SALARY			
DATE OF APPLICATION	DATE AVAILABLE				
Full Name:		AKA:			
Current Address:		How Long:			
Past Address:		How Long:			
Home Telephone:	Cell:	Email:			
GENERAL INFORMATION					
Are you less than 18 years of age? (If yes, you will no	eed to present a work permit.)		Yes	No	
Do you have reliable means to transportation?			Yes	No	
Do you have a valid driver's license?			Yes	No	
Are you legally eligible for employment in the United	States? (Proof will be required.)		Yes	No	
Have you ever been discharged from any employment	nt or asked to resign? If yes, please expl	ain under "Information."	Yes	No	
Do you have any family members and/or friends at the	is company? If so, please list under "Inf	ormation."	Yes	No	
Were you referred to this position by anyone? If so,	please list under "Information."		Yes	No	
Are you able to perform the essential functions of the needed under "Information."	Yes	No			
Are you able to work overtime?	Yes	No			
Have you worked at this company before? If yes, pro	ovide job title, location and dates of empl	oyment under "Information."	Yes	No	
EDUCATION & SKILLS					
NAME OF SCHOOL	CITY & STATE	GRADE OR DEGREE COMPLETED	DID YOU	GRADUATE?	
Do you have any special licenses, certificates or special	cial training? If so, please list under "Sp	ecial."	Yes	No	
Do you have any special skills not listed that are rele	Yes	No			
Are you proficient with Microsoft Word and Excel?	Yes	No			
Are you computer literate? If so, list software knowle	Yes	No			
Special:					
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EMPLOYMENT LICTORY

EMPLOYER	FRO	OM	Т	0	JOB TITLE		
	MO	YR	MO	YR			
NAME OF COMPANY					DESCRIBE YOUR	RDUTIES	
ADDRESS	STAR	TING SALARY:	\$				
ELEPHONE	ENI	DING SALARY:	\$				
IAME & TITLE OF IMMEDIATE SUPERVISOR	REASON FOR	LEAVING				MAY WE CONTACT YOUR EMPLOYER?	
2 EMPLOYER	FRO	FROM TO			JOB TITLE		
	MO	YR	MO	YR			
NAME OF COMPANY					DESCRIBE YOUR	RDUTIES	
ADDRESS	STAR	TING SALARY:	\$	I .			
ELEPHONE	ENI	DING SALARY:	\$				
IAME & TITLE OF IMMEDIATE SUPERVISOR	REASON FOR	LEAVING				MAY WE CONTACT YOUR EMPLOYER?	
BEMPLOYER	FRO	FROM		0	JOB TITLE		
	MO	YR	MO	YR			
IAME OF COMPANY					DESCRIBE YOUR	RDUTIES	
ADDRESS	STAR	STARTING SALARY: \$					
TELEPHONE	ENI	ENDING SALARY: \$					
NAME & TITLE OF IMMEDIATE SUPERVISOR	REASON FOR LEAVING			MAY WE CONTACT YOUR EMPLOYER?			
PLEASE EXPLAIN ANY GAPS IN EMPLOYMENT:							

REFERENCES - Give below five	(5)) business references, which	h you	ı have	known	for at	least	one ((1)) y	ear
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NAME:		BUSINESS NAME:	PHONE NUMBER / EMAIL	YEARS AQUAINTED		

PLEASE READ CAREFULLY AND SIGN BELOW:

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I certify that all answers given by me are true, accurate and complete, I understand that the falsification, misrepresentation or omission of fact on this application (or any other accompanying or required documents) will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered. . I further certify that I, the undersigned applicant, have personally completed this application.

It is the policy of the company to afford equal opportunity to all employees and applicants for employment without regard to age, race, religion, color, sex, gender bias, national origin, marital status, expunged juvenile records, or pregnancy, and any and other characteristic protected by Federal, State or Local law.

I authorize the investigation of all statements and information contained in this application. I authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is at will, for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

I acknowledge that I have read and understand the above statements and hereby grant permission to confirm the information supplied on this application by me.

Date