



Date _____, 20____

Application for Employment Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Last name _____ First name _____ Middle name _____

Street Address _____

City _____ State _____ ZIP _____

Telephone _____ Social Security # _____ DOB _____

Position applied for _____

When can you start? _____

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis? (You may be required to provide documentation.) Yes No

Are you willing to work swing shift? Yes No

Are you looking for full-time employment? Yes No

Are you willing to work Saturday and Sunday? Yes No

If no, what hours are you available? _____

Employment History (The most recent employer)

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____ May we contact? Yes No

Responsibilities _____

Reason for leaving _____

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history. I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or executive of this company, other than the president, has any authority to alter the foregoing.

Signature _____ Date _____