

# Application for Employment

Date: \_\_\_\_\_

Federal and state laws prohibit discrimination in employment practices on account of race, color, religion, creed, national origin, ancestry, age, marital status, veteran status, non-job related disability or any other protected group status.

Please print

Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street City State Zip

Phone Number: \_\_\_\_\_

Do you have a legal right to be employed in the U.S.?  Yes  No

Are you over the age of 18?  Yes  No

Have you ever been convicted of a crime?  Yes  No

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

How did you hear about us?  Newspaper ad  Company's website  
 Employment agency  Employee  
 School  Other \_\_\_\_\_

## Job Interest

Position Desired: \_\_\_\_\_

Full Time  Part Time (If part time, hours wanted) \_\_\_\_\_

Wages or Salary Desired: \$ \_\_\_\_\_ Per: \_\_\_\_\_

Other positions for which you are qualified? \_\_\_\_\_

Date available to begin working: \_\_\_\_\_

Were you ever employed by this organization?  Yes  No

If yes, When: \_\_\_\_\_ Where: \_\_\_\_\_

Rate of pay: \_\_\_\_\_ Position: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

## Education

Fill in the information starting with the most recent school attended

Name of School City and State	Did you graduate?	Major	Degree	GPA

# Application for Employment

## Employment History

Fill in the information starting with your most recent employer.

<b>COMPANY NAME</b>		<b>Dates Worked</b>		<b>Position(s) Held</b>
		From	To	
Address, City, State, Zip				
Phone Number		<b>Duties/Responsibilities</b>		
Name of Supervisor				
Base Gross Income \$	Starting Wage per <input type="checkbox"/> Hour <input type="checkbox"/> Year	Ending/Current \$	per <input type="checkbox"/> Hour <input type="checkbox"/> Year	<b>Reason for Leaving</b>
<input type="checkbox"/> Bonus		Amount Received \$		
<input type="checkbox"/> Incentives				

May we contact this employer for a reference?

Yes  No

<b>COMPANY NAME</b>		<b>Dates Worked</b>		<b>Position(s) Held</b>
		From	To	
Address, City, State, Zip				
Phone Number		<b>Duties/Responsibilities</b>		
Name of Supervisor				
Base Gross Income \$	Starting Wage per <input type="checkbox"/> Hour <input type="checkbox"/> Year	Ending/Current \$	per <input type="checkbox"/> Hour <input type="checkbox"/> Year	<b>Reason for Leaving</b>
<input type="checkbox"/> Bonus		Amount Received \$		
<input type="checkbox"/> Incentives				

May we contact this employer for a reference?

Yes  No

<b>COMPANY NAME</b>		<b>Dates Worked</b>		<b>Position(s) Held</b>
		From	To	
Address, City, State, Zip				
Phone Number		<b>Duties/Responsibilities</b>		
Name of Supervisor				
Base Gross Income \$	Starting Wage per <input type="checkbox"/> Hour <input type="checkbox"/> Year	Ending/Current \$	per <input type="checkbox"/> Hour <input type="checkbox"/> Year	<b>Reason for Leaving</b>
<input type="checkbox"/> Bonus		Amount Received \$		
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May we contact this employer for a reference?

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<b>COMPANY NAME</b>		<b>Dates Worked</b>		<b>Position(s) Held</b>
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Address, City, State, Zip				
Phone Number		<b>Duties/Responsibilities</b>		
Name of Supervisor				
Base Gross Income \$	Starting Wage per <input type="checkbox"/> Hour <input type="checkbox"/> Year	Ending/Current \$	per <input type="checkbox"/> Hour <input type="checkbox"/> Year	<b>Reason for Leaving</b>
<input type="checkbox"/> Bonus		Amount Received \$		
<input type="checkbox"/> Incentives				

May we contact this employer for a reference?

Yes  No

# Application for Employment

## Employment History *cont.*

Account for all unemployment other than those due to personal injury, illness or disability.

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## Skills

Please list any skills that may be related to the job for which you are applying.

Computer skills \_\_\_\_\_

Word Processing \_\_\_\_\_

Software Packages \_\_\_\_\_

Programming Languages \_\_\_\_\_

Other \_\_\_\_\_

## References

Please list three work references. If not applicable, please list three personal references other than a relative.

Name	Relationship to You	Address	Phone Number

## Other Job Related information

Are there any organizations that you belong to that are job related? (Do not list any organizations that would reveal race, color, religion, creed, national origin, ancestry, age, marital status, veteran status, non-job related disability or any other protected group status.)

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List any awards, publications or special accomplishments (Do not list any that would reveal race, color, religion, creed, national origin, ancestry, age, marital status, veteran status, non-job related disability or any other protected group status.)

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## Application *for Employment*

### Applicant Must Read and Sign

I hereby affirm that the information provided on this application is true and complete. I also understand that any omission or misrepresentation of information provided may result in my rejection or termination from employment.

I authorize the Company to contact and obtain information from all references listed and release any employers or persons listed from liability for any damages from furnishing such information.

In the event of my employment with the Company, I will comply with all of the rules and policies of the employer. I understand that if I am employed, my employment will be at-will for no set period of time, and that my employment may be terminated for any reason at any time by either me or the Company.

This certifies that I have read and fully understand the above statement.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_