

APPLICATION FOR EMPLOYMENT

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

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|--------------------------------------|--|--|--|--|
| P E R S O N A L | Last Name _____ First _____ Middle _____ | | | Date _____ |
| | Street Address _____ | | | Home Telephone () _____ |
| | City, State, Zip _____ | | | Business Telephone () _____ |
| | Have you ever applied for employment with us? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: Month and Year _____ Location _____ | | | |
| | Position Desired _____ | | | Pay Expected _____ |
| | Apart from absence for religious observance, are you available for full-time work? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, what hours can you work? _____ | | | Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Are you legally eligible for employment in the United States? | | | When will you be available to begin work? _____ |
| | Other special training or skills (languages, machine operation, etc.) _____ | | | |

| E D U C A T I O N | School | Name and Location of School | Course of Study | No. of Years Completed | Did You Graduate? | Degree or Diploma |
|---|--------------------------|-----------------------------|-----------------|------------------------|---|-------------------|
| | Graduate | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | College | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | Business/Trade/Technical | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | High School | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| | Elementary | | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

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| Membership in Professional or Civic Organizations <i>(Exclude those which may disclose your race, color, religion or national origin)</i> |
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EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer.

| | | |
|----------|---|---|
| 1 | Company Name | Telephone () |
| | Address | Employed - (State month and year) From To |
| | Name of Supervisor | Weekly pay Start Last |
| | State Job Title and Describe Your Work _____ | Reason for Leaving |

| | | |
|----------|---|---|
| 2 | Company Name | Telephone () |
| | Address | Employed - (State month and year) From To |
| | Name of Supervisor | Weekly pay Start Last |
| | State Job Title and Describe Your Work _____ | Reason for Leaving |

| | | |
|----------|---|---|
| 3 | Company Name | Telephone () |
| | Address | Employed - (State month and year) From To |
| | Name of Supervisor | Weekly pay Start Last |
| | State Job Title and Describe Your Work _____ | Reason for Leaving |

| | | |
|----------|---|---|
| 4 | Company Name | Telephone () |
| | Address | Employed - (State month and year) From To |
| | Name of Supervisor | Weekly pay Start Last |
| | State Job Title and Describe Your Work _____ | Reason for Leaving |

| | |
|--|---------------------------------------|
| We may contact the employers listed above unless you indicate those you do not want us to contact. | DO NOT CONTACT |
| | Employer Number(s) _____ Reason _____ |

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| S I G N A T U R E | The information provided in this Application for Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal. |
| | I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. |
| | If you decide to engage an investigative consumer reporting agency to report on my credit and personal history I authorize you to do so. If a report is obtained you must provide, at my request, the name of the agency so I may obtain from them the nature and substance of the information contained in the report. |
| | Date _____ Signature _____ |