

Employment Application



| General Information | | | | | | |
|---|---|---|--|-------------------|--|----|
| Name (Last) | (First) | (Middle Initial) | (Home Telephone) | | | |
| Address (Mailing Address) | (City) | (State) | (Zip) | (Other Telephone) | | |
| SSN Last Four Digits _____ | Are you 18 years or older? <input type="checkbox"/> Yes <input type="checkbox"/> No | | Are you legally entitled to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| E-Mail Address _____ | | | | | | |
| Voluntary Information: Gender and race information are used for equal employment opportunity and affirmative action purposes only. The information is voluntary and will not be used when considering you for employment with our company. <input type="checkbox"/> I do not wish to self-disclose this information | | | | | | |
| Gender <input type="checkbox"/> Female <input type="checkbox"/> Male Race / Ethnicity <input type="checkbox"/> Black/not Hispanic <input type="checkbox"/> Asian or Pacific Islander <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Hispanic <input type="checkbox"/> White (not Hispanic) | | | | | | |
| Position | | | | | | |
| Position or Type of Employment Desired | | Will Accept: <input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time <input type="checkbox"/> Temporary | Expected Hourly Rate | | | |
| Are you able to perform the essential functions of the job you are applying for, with or without reasonable accommodation? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | Expected Annual Earnings | | | |
| How did you learn about this position? | | Date Available: | | | | |
| Education & Training (Check all that apply. List school and degree earned or program certificate/diploma.) | | | | | | |
| <input type="checkbox"/> 1. Did not complete high school / GED <input type="checkbox"/> 2. Completed GED/HSED <input type="checkbox"/> 3. Graduated from High School <input type="checkbox"/> 4. Some college, no degree <input type="checkbox"/> 5. Technical school certificate: _____ _____ <input type="checkbox"/> 6. One-year technical school diploma: _____ _____ <input type="checkbox"/> 7. Associate degree: _____ _____ <input type="checkbox"/> 8. Bachelor's degree: _____ _____ <input type="checkbox"/> 9. Some graduate degree courses <input type="checkbox"/> 10. Graduate school degree: _____ _____ <input type="checkbox"/> 11. Other technical training or certifications earned: _____ _____ _____ | | | | | | |
| Military Service | | | | | | |
| Branch of Service | | Date of Entry | Date of Discharge | | | |
| Rank at Discharge | | Type of Discharge (If other than honorable, explain) | | | | |
| Work Experience (Provide information on your three most recent employers.) | | | | | | |
| | Employer #1: Current/most recent | | Prior Employer #2 | | Prior Employer #3 | |
| Employer | | | | | | |
| Address | | | | | | |
| City, State, Zip | | | | | | |
| Telephone | | | | | | |
| Immediate Supervisor | | | | | | |
| Dates of Employment | From | To | From | To | From | To |
| Position | | | | | | |
| Pay | | | | | | |
| Reason for leaving | | | | | | |
| May we contact regarding your work record? | <input type="checkbox"/> Yes <input type="checkbox"/> No | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

Certification Statement: I certify the information contained in this application is true, correct, and complete. I understand that, if employed, false statements reported on this application may be considered sufficient cause for dismissal.

Signature of Applicant _____ Date _____