

## **Employment Application (Confidential)**

\* indicates required information. Incomplete information on this form is required upon employment.

| * Name  |  |  | _   |                                       |
|---|--|--|---|---------------------------------------|
| Address   |  |  | _   |                                       |
| City  | * State  |  | Zip   | <del></del>                           |
| * Telephone Number _  |  |  |   |                                       |
| E-mail address  |  |  |   |                                       |
| Position(s) interested  | in   | <del> </del>                                   |   | <del> </del>                          |
| Area or State where y   | you are available for wo   | ork  |   | · · · · · · · · · · · · · · · · · · · |
| When are you availab  | ole to work?   |  |   | _                                     |
| A Have you ever been of Are you employed no May we contact your Are you on a lay-off at Are you available to version of Can you travel if the jets. | olication here before? employed here before? ow? present employer? and subject to recall? work: Full Time Part ob requires it? ars of age? (If so, you a | Yes N<br>Yes N<br>Yes N<br>Time Shif<br>Yes No | No<br>No<br>No<br>No<br>It Work<br>o<br>Ile for emp |                                       |
|   | om lawfully becoming eatus? (proof of citizensh<br>nent).  |  | ation statu   |                                       |
| necessarily disqualify a  | cted of a felony within t<br>applicant from employm  | ent) Yes _                                     | No  | _                                     |
| Are you a veteran of th   | e US Military Service?   | Yes No.  | Branc   | ————<br>h                             |

## **Education**

| School Name  | Years Completed (circle) | Diploma/Degree | Course of Study |  |
|--|--------------------------|----------------|-----------------|--|
| Elementary   |                          |                |                 |  |
| ·  | 4 5 6 7 8                |                |                 |  |
| High   |                          |                |                 |  |
|  | 9 10 11 12               |                |                 |  |
| College/University   |                          |                |                 |  |
| ,  | 1 2 3 4                  |                |                 |  |
| Graduate/Professional  |                          |                |                 |  |
| ·  | 1 2 3 4                  |                |                 |  |
| Specialized Training,  |                          |                |                 |  |
| Apprenticeship, Skills &   |                          |                |                 |  |
| Extra-Curricular Activities  |                          |                |                 |  |
|  |                          |                |                 |  |
| Honors Received:   |                          |                |                 |  |
|  |                          |                |                 |  |
|  |                          |                |                 |  |
| List Professional, trade, business or civic activities and offices held.             |                          |                |                 |  |
| (You may exclude those which indicate race, color, religion, sex or national origin) |                          |                |                 |  |
|  |                          |                |                 |  |
|  |                          |                |                 |  |
|  |                          |                |                 |  |
|  |                          |                |                 |  |

| List any special skills and qualifications you believe you have: |  |  |  |  |
|--|--|--|--|--|
|  |  |  |  |  |
|  |  |  |  |  |

## **Experience and Prior Work History:** (List most recent first)

| Employer  | _ Phone                                 |
|---|---|
| Address   |   |
| Job Title   |   |
| Supervisor  |   |
| Reason for Leaving  |   |
| Dates Employed, From  | _to                                     |
| Reason for Leaving<br>Dates Employed, From<br>Rate of Pay/Salary – Starting | Final                                   |
|   |   |
| Employer  | Phono                                   |
| Employer  |   |
| Address   |   |
| Job Title   |   |
| Supervisor  |   |
| Reason for Leaving<br>Dates Employed, From                                  | to                                      |
| Rate of Pay/Salary – Starting   | Final                                   |
| Trace of Fay/Galary Glarting  | i iiidi                                 |
|   |   |
| Employer  | Phone                                   |
| Address   |   |
| Job Title   | <del> </del>                            |
| Supervisor  |   |
| Reason for Leaving  |   |
| Dates Employed, FromRate of Pay/Salary – Starting                           | _ to                                    |
| Rate of Pay/Salary – Starting   | Final                                   |
|   |   |
| Employer  | Phone                                   |
| Address   |   |
| Job Title   |   |
| Supervisor  |   |
| Reason for Leaving  |   |
| Dates Employed, From  | to                                      |
| Dates Employed, From  | Final                                   |
| References:   |   |
|   |   |
| Please list the names, addresses, and                                       | I telephone numbers of three references |
| who are not related to you and are no                                       |   |
|   |   |
|   |   |
|   |   |

## **Applicant's Statement**

I certify that the answers given herein are true and complete to the best of my knowledge.

I authorize the investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not a contract of employment.

| given in my application or i | nt, I understand that false or<br>interview may result in discl<br>ed to abide by all rules and | harge. I understand that if I |
|------------------------------|---|-------------------------------|
|                              | Signed  | Date                          |