APPLICATION RESSUCCESS FOR EMPLOYMENT



We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

Position(s) Applied For			1	Date of Application	1
How Did You Learn About Us? Advertisement Employment Agency	Relative Friend	☐ Inquiry ☐ Other			
Last Name	First Name		Midd	le Name	
Address					
Telephone Number(s)			Social Securi	ty Number (Last 4 o	ligits)
Best time to contact you at hor	ne is:		• • • • • • • •	<u> </u>	AM PM
If you are under 18 years of ag	e, can you provide	required		□ Voc	□ No
proof of your eligibility to worl					□ No
Have you ever filed an applicat	ion with us before?	?		□ Yes	□ No
If Yes, give date	· · · · · · · · · · · · · · · · · · ·				
Have you ever been employed	with us before?			□ Yes	□ No
If Yes, give date					
Do any of your friends or relat	ives, other than spo	ouse, work here?		□ Yes	□ No
Are you currently employed? .				□ Yes	□ No
May we contact your present e	mployer?			□ Yes	□ No
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status					
country because of visa of finit	ingration Status			☐ Yes	□ No
Date available for work/_	/ What is y	our desired salary ra	nge?		
Are you available to work:	\square Full-Time	(please indicate 1	2 3 shift)		
	☐ Part-Time	(please indicate Mo	ornings	Afternoon)	
	☐ Temporary	(please indicate da	tes available		_//)
Are you currently on "lay-off" status and subject to recall?					
Can you travel if a job requires it?					

EDUCATION

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				
Describe any specialized t	raining, apprenticeship, s	skills and extra-curricula	r activities.	
Describe and taken late late		aited Chates williams		
Describe any job-related to	aming received in the Ui	med States military.		

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer		mployed	Work Performed	
	From	То	World I driefflied	
Supervisor				
	Dates E	mployed	Work Performed	
	From	10		
Supervisor				
	Dates E	mployed	Work Performed	
	From	То		
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l/a				
			Work Performed	
	From	10		
Supervisor				
	Supervisor	Supervisor Dates E From Supervisor Dates E From Dates E From	Supervisor Dates Employed From To Supervisor Dates Employed From To Dates Employed From To	

List professional, trade, business or civic activities and offices held.

ADDITIONAL INFORMATION

Other Qualifications Summarize special job-rela	ted skills and qualificati	ons acquired from empl	oyment or other experience.
PECIALIZED SKILLS	(CHECK SKILLS/E	QUIPMENT OPERATED)
Terminal	Spreadsheet	Production/Mobile Machinery (list)	Other (list)
PC/MAC	Word Processing		
Typewriter	Shorthand		
WPM	WPM		
ote to Applicants: DO NOT NFORMED ABOUT THE R			
	or occupation for which		easonable accommodation, the eview of the activities involvedNO
EFERENCES			
		()
	(Name)		Phone #
	(Address)		(Email)
	(NT	()
	(Name)		Phone #
	(Address)		(Email)
3.	(01)	() DL "
	(Name)		Phone #
	(Address)		(Email)

FOR PERSONNEL DEPARTMENT USE ONLY			
Position(s) Applied For Is Oper	n:		
Position(s) Considered For:	· · · · · · · · · · · · · · · · · · ·		
7	Date		

NAME: _

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

Signature of Applicant

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

FOR PERSONNEL DEPARTMENT USE ONLY				
Arrange Interview $\ \square$ Yes $\ \square$	No			
Remarks				
·				
Employed □ Yes □ No	Date of Employment _	INTERVIEWER	DATE	
Job Title Hourl	y Rate/ lary Department			
Ву	NAME AND TITLE	DATE	*	

Date