

PERSONAL INFORMATION

Last Name	First Name	M.I.
Address	City, State, Zip Code	
Primary Phone	Alternate Phone	
Email	Date of Application	

Are you at least 16 years of age?	☐ Yes	☐ No
Are you legally eligible for employment in this country?	☐ Yes	☐ No
Have you been convicted of a crime in the last (7) years?	☐ Yes	☐ No
If yes, please explain		

POSITION

Position Applied For:
Employment Desired: Full Time ☐ Part Time ☐ Seasonal/Temporary ☐
Date Available:

SHIFT AVAILABILITY

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							
To							

EDUCATION

	School Name/Location	Diploma/Degree	Major/Area of Study
High School			
College/University			
Other Education			

REFERENCES

Name:	Relationship:	Phone:
Name:	Relationship:	Phone:
Name:	Relationship:	Phone:

PREVIOUS EMPLOYMENT

Name of employer: Address: Phone number:	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title:		
Reason for leaving:			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of employer: Address: Phone number:	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title:		
Reason for leaving:			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

PLEASE LIST ANY RELEVANT SKILLS, SPECIAL INTERESTS, TRAINING AND MEMBERSHIPS

We are an equal opportunity employer. We comply with all applicable Federal, State and Local laws concerning discrimination in employment. No question in this application is intended to elicit information in violation of any such law nor will any information obtained in response to any question be used in violation of any such law.

To be completed by all applicants – Please read carefully before signing:

I certify that the information contained in this application and in any resume provided by me or any party representing my interests is correct and complete to the best of my knowledge. I understand that any false statements, misrepresentations or omissions made by me on this application or any supplement thereto, will be sufficient grounds for rejection of this application or discharge after employment.

I give the employer the right to obtain pertinent information concerning me from former employers and others, and I release all those providing or requesting such information from any liability that may arise by truthful disclosures or such investigations.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I understand it is the company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I'm hired, I will be required to provide proof of identity and legal work authorization.

Your signature acknowledges you have read and agree to the material above.

Applicant's Signature _____ Date ____/____/____