

# APPLICATION FOR EMPLOYMENT



We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, handicap or national origin.

## PERSONAL INFORMATION

Date \_\_\_\_\_

Name \_\_\_\_\_  
Last
First
Middle

Present Address \_\_\_\_\_  
Street
City
State
Zip

Permanent Address \_\_\_\_\_  
Street
City
State
Zip

Phone No. \_\_\_\_\_ **Email:** \_\_\_\_\_

Referenced By \_\_\_\_\_ Are you 18 years of age or older?  Yes  No  
(If no we will need to verify if you meet the minimum age requirement for employment in this state.)  
 Do you have the legal right to work in the US  Yes  No

## EMPLOYMENT DESIRED

Position \_\_\_\_\_ **Date you can start:** \_\_\_\_\_ **Salary Desired:** \_\_\_\_\_

Are you employed now:  Yes  No If so may we contact your present employer?  Yes  No

Ever applied to this Company before?  Yes  No Where? \_\_\_\_\_ When? \_\_\_\_\_

## EDUCATION

	Name and Location of School	Circle Last year Completed	Did you Graduate?	Subjects Studied and Degree(s) received
GRAMMAR SCHOOL	_____		Yes _____ No _____	
	_____			
HIGH SCHOOL	_____	1 2 3 4	Yes _____ No _____	
	_____			
COLLEGE	_____	1 2 3 4	Yes _____ No _____	
	_____			
Trade, Business Or Correspondence School	_____	1 2 3 4	Yes _____ No _____	
	_____			

## GENERAL

**Labor/nursery Only:** Are you physically capable of lifting 60 to 80 pounds, repetitively on a 9-hour basis? \_\_\_\_\_

Job related skills (typing, driver's license, CDL license, machinery operator, etc) \_\_\_\_\_

**FORMER EMPLOYERS** List below your last four employers, starting with the last one first

Date Month and Year	Name and Address of Employer	Salary (upon leaving)	Position	Reason for leaving
From				
To				
From				
To				
From				
To				
From				
To				

**PROFESSIONAL REFERENCES** List below three professional references not related to you whom you have known at least one year

Name	Phone Number	Position/Company	Years Acquainted
1			
2			
3			

**AUTHORIZATION**

I authorize investigation on all statements contained in this application. I understand that misrepresentation of information requested is cause for dismissal. Further, I understand and agree that my employment may be seasonal and not full time.

Date \_\_\_\_\_ Signature \_\_\_\_\_

In case of  
Emergency Notify \_\_\_\_\_

Address \_\_\_\_\_ Phone number \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE – OFFICE USE ONLY**

Interviewed by \_\_\_\_\_ Date \_\_\_\_\_

**REMARKS** \_\_\_\_\_

INS Form I-9 completed Yes \_\_\_\_\_ No \_\_\_\_\_

Hired \_\_\_\_\_ For Dept. \_\_\_\_\_ Position \_\_\_\_\_ Will Report \_\_\_\_\_ Wages/Salary \_\_\_\_\_

Approved: 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Employment Manager

Dept. Head

General Manager