

PERSONAL INFORMATION

Name: _____
Last First Middle

Social Security Number: _____ Date: _____

Present Address: _____
Street City State Zip

Permanent Address: _____
Street City State Zip

Phone Number: (____) _____ Are you 18 years or older? Yes ___ No ___

Other phone number where you can be reached (____) _____

Email Address: _____

EMPLOYMENT DESIRED

Position: _____ Shift Preferences: 1st _____ 2nd _____ 3rd _____

I am available to work: Full-time: _____ Part-time: _____ Overtime: _____ Temporary: _____ Summer Only: _____

Date you can start: _____ Are there any hours, shifts or days you cannot work? _____

Rate of Pay Expected: \$ _____ per _____

How Did You Hear About Us? Newspaper Ad Current Employee _____ Other _____

Are you legally able to work in the United States? Yes ___ No ___ (proof of eligibility will be required upon offer of employment)

Have you been convicted of a felony, or convicted in a general court – martial? (A conviction record will not necessarily be a bar to employment. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account). Yes ___ No ___ If yes, please give date and explain:

EDUCATION & SKILLS

(Check the highest level or equivalent completed)

High School College/Tech.

1 2 3 4 1 2 3 4 5 6 7 8

Area(s) of study: _____
Degree(s) Received: _____

Have you earned a National Career Readiness Certification credential? _____ If yes, please list the level you earned (bronze, silver or gold). _____

List any additional trainings, certificates, skills, abilities or information not in your work history, but would be useful in evaluating your qualifications. Please include machines you operate (computer terminals, press, etc...).

Employment History and/or Military Experience (Start with current or most recent employer)

COMPANY NAME:		City/State:
Supervisor:	Employment Dates: From ___/___ to ___/___	
Phone #:	Position:	
May we contact? Yes No	Salary:	
Reason for Leaving:		
Duties:		

COMPANY NAME:		City/State:
Supervisor:	Employment Dates: From ___/___ to ___/___	
Phone #:	Position:	
May we contact? Yes No	Salary:	
Reason for Leaving:		
Duties:		

COMPANY NAME:		City/State:
Supervisor:	Employment Dates: From ___/___ to ___/___	
Phone #:	Position:	
May we contact? Yes No	Salary:	
Reason for Leaving:		
Duties:		

References (Business or Personal)

1.	_____ (____)	_____ (____)
	(Name)	Phone #
	_____ (Address)	
2.	_____ (____)	_____ (____)
	(Name)	Phone #
	_____ (Address)	
3.	_____ (____)	_____ (____)
	(Name)	Phone #
	_____ (Address)	

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 "I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal. I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have and release all parties from all liability for any damage that may result from this. I understand this application is not an implied or expressed contract of employment and agree that, if hired, my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time with or without prior notice and with or without cause. I acknowledge that I have read and understand the above statement".

DATE: _____ SIGNATURE: _____

APPLICATION WILL NOT BE VALID UNLESS EMPLOYMENT HISTORY IS COMPLETE