



# EMPLOYMENT APPLICATION

Please Print or Type

Position Applying For: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
Last Name First MI ( ) Home Phone

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

\_\_\_\_\_  
Mailing Address (If different from above) ( ) Cell Phone

\_\_\_\_\_  
Email Address Driver's License Number State

Are you over 18?  YES  NO Are you a student?  YES  NO

Are you a U.S. Citizen?  YES  NO ...Or do you have an entry permit which allows you to work?  YES  NO

Do you have access to a vehicle? (Required for some positions)  YES  NO

Days and hours available for work: \_\_\_\_\_

**Existence of a criminal record does not constitute an automatic bar to employment and your record will be considered only as it may substantially relate to the job for which you are applying.**

Have you been convicted of any violations other than minor traffic convictions?  YES  NO

If yes, for what have you been convicted, when, and where? \_\_\_\_\_

## EDUCATION

High School Name & Location: \_\_\_\_\_

Highest Grade Completed: \_\_\_\_\_  High School Diploma or  G.E.D. Equivalency (Check One)

College(s) Name(s) & Location(s): \_\_\_\_\_

\_\_\_\_\_  
Dates Attended Major(s)

\_\_\_\_\_  
Degree(s) Year of Graduation

Any Training/Education Not Covered Above: \_\_\_\_\_

## EMPLOYMENT REFERENCES – May we communicate with your present employer? YES NO

\_\_\_\_\_  
Name Title Company ( ) Phone

\_\_\_\_\_  
Name Title Company ( ) Phone

\_\_\_\_\_  
Name Title Company ( ) Phone

**WORK EXPERIENCE – Please start with your most recent job, provide a complete description, be specific. Indicate any changes in job title under the same employer as a separate position. A separate sheet may be added if necessary.**

Employer	Type of Business	Address
Your Title	Name of Supervisor	(      ) Phone
Duties: _____		
Employed From _____ To _____ Starting Salary _____ Ending Salary _____		
Reason for Leaving: _____		

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Duties: _____		
Employed From _____ To _____ Starting Salary _____ Ending Salary _____		
Reason for Leaving: _____		

**MILITARY SERVICE**

Division of Armed Forces	Stationed at	Address
Highest Rank Achieved	Commanding Officer	(      ) Phone
Dates of Enrollment: From _____ To _____		

**HONORS & AWARDS – List any honors, awards, or organizations to which you belong that you feel may be relevant to the position for which you are applying.**

\_\_\_\_\_

**APPLICANT: PLEASE READ AND SIGN BELOW – The information provided by me in this application is true and complete to the best of my knowledge. I understand that if I am employed, any false statements will be considered as cause for possible dismissal. You are hereby authorized to conduct any investigation of my personal history and/or credit and financial records employing investigative or credit agencies or bureaus of your choice subject to the provisions of the Fair Credit Reporting Act.**

Signature of Applicant: \_\_\_\_\_ Date \_\_\_\_\_