Application for Employment

Please Print

Equal access to programs, services and employment opportunities is available to all persons without regard to age, race (including traits historically associated with race, including but not limited to, hair texture and protective hairstyles), creed, religion (including wearing religious attire, clothing or facial hair), color, national origin, sexual orientation, gender identity, military status, sex (including pregnancy), disability, familial status, marital status, reproductive health decision making, domestic violence victim status, genetic information, or any other basis protected by federal, state, and/ or local law.

In accordance with the Americans with Disabilities Act and/or applicable state and local laws, applicants requiring reasonable accommodations for the application and/or interview process should notify the Human Resources Department. Examples of reasonable accommodations include making a change to the application process; providing written materials in an alternate format such as braille, large print, or audio recording; using a sign language interpreter; using specialized equipment; or modifying testing conditions.

Name	Applicant ID #		
Address			
Street	City State ZIP Code		
Telephone # () Cellular/Other Phone # (J E-mail Address		
Position(s) applied for	Date of application/		
Referral Source (e.g., Walk-in, Job Posting, Company's Website, etc.)			
If necessary, best time to call you is	Will you work overtime if required? Yes No If no, please explain:		
() : MM If you are under 18 and it is required, can you furnish a work permit?	Are you able to perform the "essential functions" of the job for which you are applying (with or without reasonable accommodation)? This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law. Yes No Need more information about the job's "essential functions" to respond		
Have you ever been employed here before?	Driver's license number required if driving may be required in the job for which you are applying:		
Type of employment desired:	Have you entered into an agreement with any former employer or other party (such as a noncompetition agreement) that might, in any way, restrict your ability to work for our company? Yes No If yes, please explain:		

Employment History	
Starting with your most recent employer, provide the following information.	
Employer	Telephone #
Street address	City State
Starting job title/final job title	Dates employed Month Year Month Year
Immediate supervisor and title (for most recent position held)	May we contact for reference? E-mail:
Why did you leave?	THES NO LEGICE
Summarize the type of work performed and job responsibilities.	
What did you like most about your position?	
What were the things you liked least about the position?	
Employer	Telephone #
Street address	City State
Starting job title/final job title	Dates employed Month Year Month Year
Immediate supervisor and title (for most recent position held)	May we contact for reference? E-mail:
Why did you leave?	Yes No Later
Summarize the type of work performed and job responsibilities.	
What did you like most about your position?	
What were the things you liked least about the position?	
Employer	Telephone #
	()
Street address	City State
Starting job title/final job title	Dates employed Month Year Month Year to
Immediate supervisor and title (for most recent position held)	May we contact for reference? E-mail: Yes No Later
Why did you leave?	
Summarize the type of work performed and job responsibilities.	
What did you like most about your position?	
What were the things you liked least about the position?	
Employer	Telephone #
Street address	City State
Starting job title/final job title	Dates employed Month Year Month Year
Immediate supervisor and title (for most recent position held)	May we contact for reference? E-mail:
Why did you leave?	
Summarize the type of work performed and job responsibilities.	
What did you like most about your position?	
What were the things you liked least about the position?	

Explain any gaps in your employn	nent, other than those due to p	ersonal illness,	injury, or disability	•
TC		1 1		
If not addressed on previous page If yes, please explain:			·	∐ Yes ∐ No
Skills and Qualifications				
Summarize any special training, skills,	languages, licenses, and/or certifi	cates that may ass	ist you in performing the po	osition for which you are applying:
Computer Skills (Include software tit				Tl
☐ Word Processing				Level:
☐ Spreadsheet				
☐ Presentation ☐ E-mail				Level: Level:
Educational Background Starting with your most recent scho	*	ing information		GPA Major/Minos
School (Include	e City and State)	Completed	Completed Diploma GED Degree Other Diploma GED Degree Certification Other Diploma GED Degree Certification Other Diploma GED Degree Diploma GED Degree	Class Rank
			Degree Certification Diploma GED Degree Certification Other Other	_
References List names and telephone numbers If not applicable, list three school o				ot previous supervisors.
Name	Title Relations to You	hîp	Telephone	E-mail # of Years Known
		()	
		()	

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When answering these questions, please exclude any information that would reveal age, race (including traits historically associated with race, including but not limited to, hair texture as protective hairstyles), creed, religion (including wearing religious attire, clothing or facial hair), color, national origin, sexual orientation, gender identity, military status, sex (including pregnancy), disability, familial status, marital status, reproductive health decision making, domestic violence victim status, genetic information, or other similarly protected status.
To what job-related organizations (professional, trade, etc.) do you belong?
,
List special accomplishments, publications, awards, etc.
Tiek and adams to adams to a large and and a
List any relevant volunteer work.
Is there any other job-related information you want us to know about you?
is there any other job related mornation you main as to know assurption
Applicant Statement
I certify that all information I have provided in order to apply for and secure work with this employer is true, complete, and correct.
I expressly authorize, without reservation, the employer, its representatives, employees, or agents to contact and obtain information from all references (personal and professional) employers, public agencies, licensing authorities, and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resumé, or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees, or representatives, for seeking, gathering, and using truthfu and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations, or organizations for furnishing such information about me.
I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any application consideration for employment on any basis prohibited by applicable local, state, or federal law.
I understand that this application remains current for only 60 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.
If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or 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 supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.
I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require m to complete an I-9 Form in this regard.
I understand that reasonable safeguards will be taken to protect all personal information provided or obtained in conjunction with this application for employment. My personal information may be shared with the employer's affiliate(s) and third parties engaged by the employer to perform services for the employer. Any personal information shared with an affiliate or third party is to be used solely to perform the services requested by the employer.
This Company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her age, race (including traits historically associated with race, including but not limited to, hair texture an protective hairstyles), creed, religion (including wearing religious attire, clothing or facial hair), color, national origin, sexual orientation, gender identity, military status, sex (including pregnancy), disability, familial status, marital status, reproductive health decision making, domestic violence victim status, genetic information, or any other protected status under applicable federal, state, or local law.
I understand that any information provided by me that is found to be false, incomplete, or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.
DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.
I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.
Signature of Applicant Date//



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