



# Application For Employment

(An Equal Opportunity Employer)

Name: \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Street City Zip  
 Are you 16 Years of Age or Older? Yes \_\_\_\_\_ No \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Former Employers				
Dates of Employment	Name, Address, Phone Number	Position	Salary	Reason for leaving

Are You Employed Now? \_\_\_\_\_ If So, May We Inquire With Your Employer? \_\_\_\_\_

Position Desired: \_\_\_\_\_ Salary Desired: \_\_\_\_\_ Date You Can Start: \_\_\_\_\_

Please Circle Days Available: S, M, T, W, Th, F, S Times Available: \_\_\_\_\_

Ever Applied Here Before? \_\_\_\_\_ If So, When? \_\_\_\_\_

Have You Ever Been Convicted of Felony? \_\_\_\_\_ If So, Please Explain \_\_\_\_\_

Education				
	Name and Location	Years Attended	Did You Graduate?	Subjects
High School				
College				

I certify that the facts contained in the application are true and complete to the best of my knowledge and I understand that if employed, falsified statements on this application shall be ground for dismissal. I authorize an investigation of all statements contained herein and the referenced listed above to give you any and all information concerning my previous employment. I release all parties from any liability that may result from furnishing you with any pertinent information they may have, personal or otherwise. I understand 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 without any prior notice.

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

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_ Hired? Yes: \_\_\_\_\_ No: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Position: \_\_\_\_\_ Salary: \_\_\_\_\_

Forms To Be Completed: W-4 \_\_\_\_\_ MW507 \_\_\_\_\_ I-9 \_\_\_\_\_ Work Permit: \_\_\_\_\_

Policies and Procedures Packets: \_\_\_\_\_ Policies and Procedures Signed: \_\_\_\_\_