



Applicant Name _____ Phone Number _____

Current Address:
Number and street _____ City _____
State & Zip _____

How were you referred to Company?: _____

Employment Positions

Position(s) applying for: _____

Salary desired: \$ _____ If hired, on what date can you start working? ____ / ____ / ____

Personal Information:

If hired, would you have transportation to/from work? [] Y or [] N

If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the United States? [] Y or [] N

If hired, are you willing to submit to and pass a controlled substance test? [] Y or [] N

Are you able to perform the essential functions of the job for which you are applying, either with / without reasonable accommodation? [] Y or [] N

Can you lift at least 75 LBS as part of required duties? [] Y or [] N

If no, describe the functions that cannot be performed

(Note: Company complies with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. It is possible that a hire may be tested on skill/agility and may be subject to a medical examination conducted by a medical professional.)

Have you ever been convicted of a criminal offense (felony or misdemeanor)? [] Y or [] N

If yes, please describe the crime - state nature of the crime(s), when and where convicted and disposition of the Case. _____

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

Education, Training and Experience

High School:

School name: _____ School address: _____

School city, state, zip: _____

Number of years completed: _____ Did you graduate? [] Y or [] N

Degree / diploma earned: _____

College / University/ Vocational :

School name: _____ School address: _____

School city, state, zip: _____

Number of years completed: _____ Did you graduate? [] Y or [] N

Degree / diploma earned: _____

Additional Information

Do you speak, write or understand any foreign languages? [] Y or [] N

If yes, describe which languages(s) and how fluent of a speaker you consider yourself to be. _____

Do you have any other experience, training, qualifications, or skills which you feel should be brought to our attention, in the case that they make you especially suited for working with us?

[] Y or [] N

If yes, please explain _____

Employment History

Are you currently employed? [] Y or [] N

If you are currently employed, may we contact your current employer? [] Y or [] N

Below, please describe past and present employment positions, dating back five years. Please account for all periods of unemployment. **Even if you have attached a resume, this section must be completed.**

1) Name of Employer: _____
Name of Supervisor: _____ Telephone Number: _____
Business Type: _____ Address: _____
City, state, zip: _____
Length of Employment (Include Dates): _____
Position & Duties: _____
Reason for Leaving: _____
May we contact this employer for references? [] Y or [] N

2) Name of Employer: _____
Name of Supervisor: _____ Telephone Number: _____
Business Type: _____ Address: _____
City, state, zip: _____
Length of Employment (Include Dates): _____
Position & Duties: _____
Reason for Leaving: _____
May we contact this employer for references? [] Y or [] N

3) Name of Employer: _____
Name of Supervisor: _____ Telephone Number: _____
Business Type: _____ Address: _____
City, state, zip: _____
Length of Employment (Include Dates): _____
Position & Duties: _____
Reason for Leaving: _____
May we contact this employer for references? [] Y or [] N

References

List below three persons who have knowledge of your work performance within the last four years. Please include professional references only.

1) Name : _____ Telephone Number: _____
Address: _____ City, state, zip: _____
Occupation: _____
Number of Years Acquainted: _____

2) Name : _____ Telephone Number: _____
Address: _____ City, state, zip: _____
Occupation: _____
Number of Years Acquainted: _____

3) Name : _____ Telephone Number: _____
Address: _____ City, state, zip: _____
Occupation: _____
Number of Years Acquainted: _____

Applicant's Signature: _____

Date: _____