Signature_

Application for Employment

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Date Last	e Last name		First name		Middle Initial		
Street Address		City		State ZI		Р	
Best telephone numb	er to contact you						
Position applied for _		When can y	vou start?	_ Desired	d Wage \$		
Are you a U.S. citizen	or authorized to work in	the U.S.? (You may be	required to provide	documen	tation.)	Yes 🗖	No
Are you looking for fu	ıll-time employment? 🗖 Y	Yes □ No if r	no, what hours are y	ou availab	ole?		
Are you willing to wo:	rk flexible shifts? 🗖 Yes	☐ No Are you wil	ling to work weeke	nds? 🗖 Y	es 🛭 No		
Have you ever been c	onvicted of a felony? (Thi	s will not necessarily af	fect your application	n.) 🛚 Ye	es 🗖 No		
If yes, please describe	conditions.						
Education: Scho	ol Name and Location		Year		Major		Degree
High School				_			
College				_			
Other Training				_			
Employment Histor	y (Start with most rece	ent employer)					
Company Name					-		
Address		Telephone					
From:	To:	Wage	Position				
Name of Supervisor _				May w	e contact?	☐ Yes	□ No
Responsibilities							
Reason for leaving							_
Company Name							
Address		Telephon	e				
From:	To:	Wage	Position				
Name of Supervisor _				May w	e contact?	☐ Yes	s \square N
Responsibilities							_
Reason for leaving							
Company Name					-		
Address	dress Telephone						
From:	To:	Wage	Position				
Name of Supervisor _				May w	e contact?	☐ Yes	□ No
Responsibilities							
Reason for leaving							

_____ Date ____