



APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, disability or national origin. Consistent with the Americans with Disabilities Act, applicant may request accommodations needed to participate in application process.

PERSONAL INFORMATION

Social Security # _____

Last Name _____ First _____ Middle _____

Address _____ City _____ State _____ Zip Code _____

Day Phone # (_____) _____ Evening Phone # (_____) _____

E-mail Address _____

Referred By _____ Are you 18 years of age or older? Yes No

Have you ever been convicted of a crime, which has not been annulled, expunged or sealed by court? A yes response does not automatically disqualify your application. If so, please explain:

EMPLOYMENT DESIRED

Position _____ Date you can start _____ Salary Desired _____

Are you employed now? Yes No If so, may we inquire of your present employer? Yes No

Ever applied to this company before? Yes No What dept.? _____ When? _____

EDUCATION (HIGHEST COMPLETED)

| Name and Location of School | Year Completed | Did you graduate? | Subjects Studied & Degree(s) received |
|---|----------------|-------------------|---------------------------------------|
| Grammar _____ | 1 2 3 4 | Yes No | _____ |
| High School _____ | 1 2 3 4 | Yes No | _____ |
| College _____ | 1 2 3 4 | Yes No | _____ |
| Trade, _____ Business or Correspondence School | 1 2 3 4 | Yes No | _____ |

GENERAL

Subjects of special study or research work _____

Job Related Skills _____

Please continue on the other side

FORMER EMPLOYERS

Please list below your last three employers, starting with the most recent first.

| Date Month & Year | Name, Address, Phone # of Employer | Salary (upon leaving) | Position | Reason for Leaving |
|-------------------|------------------------------------|-----------------------|----------|--------------------|
| From | | | | |
| To | | | | |
| From | | | | |
| To | | | | |
| From | | | | |
| To | | | | |

REFERENCES

List below three persons not related to you whom you have known at least a year and one relative.

| Name | Relationship | Phone # | Years Acquainted |
|------|--------------|---------|------------------|
| | | | |
| | | | |
| | | | |
| | | | |

If you are to be hired by this company, you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.

AUTHORIZATION

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge, I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by this company.

I understand that any employment is conditioned on a background check, I authorize this company to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation to this company, without giving me prior notice of such disclosure. In addition, I release this company, and former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation of disclosure.

I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or this company. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon this company unless made in writing.

If I am offered employment I agree to submit to a medical examination and drug test before starting work. If employed, I also agree to submit to medical examination or drug test at any time deemed appropriate by this company and permitted by law. I consent to such examinations and test, and I request that the examining doctor disclosed to this company the results of the examination, which results shall remain confidential and segregated from my personnel file, I understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test, and if I am hired a condition of my employment will be that I abide by this company's Drug and Alcohol Policy.

I understand that filling out this form does not indicate there is a position open and does not obligate this company to hire. If hired, I agree to abide by all company work rules, policies and procedures. This company retains the right to revise its policies or procedures, in whole or in part, at any time.

SIGNATURE _____

DATE _____