



## APPLICATION FOR EMPLOYMENT

Date: \_\_\_\_\_ Position(s) applying for: \_\_\_\_\_

Name: \_\_\_\_\_  
(first) (middle) (last)

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Home Address: \_\_\_\_\_  
(street) (city) (state) (zip)

Home Telephone: \_\_\_\_\_ Work Telephone: \_\_\_\_\_

May we leave messages at your home number? Yes ☐ No ☐  
May we leave messages at your work number? Yes ☐ No ☐

Date available to report to work: \_\_\_\_\_

### **Background Information**

Do any relatives currently work for this company? Yes ☐ No ☐  
If "yes", then please state the name(s) and relationship(s): \_\_\_\_\_

Are you at least 18 years of age? Yes ☐ No ☐  
If "no", you must be able to verify that you meet minimum legal age requirements.

If you are offered a position with this company, can you provide proof of U.S. Citizenship or proof of your legal right to work in the U.S.? Yes ☐ No ☐

If offered a position with this company, do you have reliable transportation? Yes ☐ No ☐  
Do you have any medical reason why you may not drive a vehicle? Yes ☐ No ☐

Have you ever been convicted of a criminal offense (felony or serious misdemeanor)? Yes ☐ No ☐

**Note:** You are not required to disclose marijuana-related offenses that are more than two years old.

If "yes", please state the nature of the offense(s), the date and court where convicted and case disposition: \_\_\_\_\_

### **Education**

	Name/Address	# years completed	Did you Graduate?	Degree
High School				
College				
Graduate				
Trade School				

\* Use additional sheet if necessary

Name: \_\_\_\_\_

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## Work History

Please provide a complete list of your work history for the last 10 years, including periods of unemployment.  
Please list your most current employment first. \*\* Use an additional sheet if necessary

Employer: \_\_\_\_\_

Phone No: \_\_\_\_\_

Address: \_\_\_\_\_  
(street) (City) (state) (zip code)

Position/Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Job Duties:

Reason for Leaving: \_\_\_\_\_

If any period of unemployment after this job, please explain:

Employer: \_\_\_\_\_

Phone No: \_\_\_\_\_

Address: \_\_\_\_\_  
(street) (City) (state) (zip code)

Position/Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Job Duties:

Reason for Leaving: \_\_\_\_\_

If any period of unemployment after this job, please explain:

Employer: \_\_\_\_\_

Phone No: \_\_\_\_\_

Address: \_\_\_\_\_  
(street) (City) (state) (zip code)

Position/Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Job Duties:

Reason for Leaving: \_\_\_\_\_

If any period of unemployment after this job, please explain:

Name: \_\_\_\_\_

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### **Professional Affiliations**

Please list any professional affiliations, memberships, and accreditations you have received:

### **Skills and Training**

Please check off the skills that apply to you:

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Public Speaking        | <input type="checkbox"/> Written/Verbal Communication   | <input type="checkbox"/> Administration & Management              |
| <input type="checkbox"/> Public Relations       | <input type="checkbox"/> Strategizing & Problem Solving | <input type="checkbox"/> General Accounting Practices             |
| <input type="checkbox"/> Computer Proficiencies | <input type="checkbox"/> General Financial Management   | <input type="checkbox"/> Multitasking & Prioritizing              |
| <input type="checkbox"/> Self Motivated         | <input type="checkbox"/> Willingness to learn           | <input type="checkbox"/> Ability to maintain professional rapport |

Other specific skills and/or training (computer training, software applications, equipment, techniques, etc.)

### **References - Please include at least 2 employment references**

Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Number of Years Known: \_\_\_\_\_

Relationship to You: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Number of Years Known: \_\_\_\_\_

Relationship to You: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Name: \_\_\_\_\_

Occupation: \_\_\_\_\_ Number of Years Known: \_\_\_\_\_

Relationship to You: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

### **Applicant's Statement**

I certify that the information contained in this application and any attachments is true and correct to the best of my knowledge. I consent to having any of the information verified by the company. I authorize my references and supervisors to provide information concerning my previous employment. I release all parties from any and all liability for damages that may result from furnishing such information, as well as from the use of or disclosure of such information by the company or its agents. I understand that any misrepresentation or material omission in this application may result in my failure to receive an offer or, if I am hired, in my dismissal.

I UNDERSTAND AND AGREE THAT IF I AM HIRED MY EMPLOYMENT CAN BE TERMINATED AT WILL, WITH OR WITHOUT CAUSE, AT ANY TIME, EITHER AT MY OPTION OR AT THE OPTION OF THE COMPANY. No representative of the company other than the President has any authority to agree to the contrary. Further, the President may not alter the at-will nature of the employment unless done so specifically in a written agreement signed by both of us.

I understand that any offer of employment is contingent on the satisfactory results of an employment reference check

I understand that all offers of employment are conditioned on my providing satisfactory proof of my identity and legal authority to work in the U.S.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_