



EMPLOYMENT APPLICATION

Notice to Applicants: As part of the application process we may conduct background checks on applicants. Falsification of any portion of the Employment Application may lead to immediate termination of employment upon discovery.

EQUAL OPPORTUNITY EMPLOYER: It is our policy to abide by all federal and state laws prohibiting employment discrimination solely on the basis of a person's race, color, creed, national origin, religion, age, sex, marital status, or physical or mental disability, ancestry, military and veteran status, gender, gender identity, and gender expression, sexual orientation and retaliation, or any other consideration made unlawful by federal, state, or local laws except where a reasonable, bona fide occupational qualification exists.

--PLEASE TYPE OR PRINT IN INK--			Today's Date	
Name				
Address			How Long?	
City			State	Zip Code
Daytime Telephone ()	Home Telephone ()	E-mail Address		
Position for which you are applying				
Check the following options you would consider <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary		If part time, specify hours of availability		What is your minimum salary requirement?
Do you have any commitments to another employer that might affect your employment with us?			List any previous names or aliases	

EDUCATION & TRAINING

	School Name	City and State	Degree/Diploma Major Course of Study	Degree Received?
High School/GED				<input type="checkbox"/> Yes <input type="checkbox"/> No
College				<input type="checkbox"/> Yes <input type="checkbox"/> No
Graduate School				<input type="checkbox"/> Yes <input type="checkbox"/> No
Trade School				<input type="checkbox"/> Yes <input type="checkbox"/> No

List any other education, training, special skills or certificates/licenses that you possess related to the job				
Professional License/ Certificate #	Professional License/Certification Type	Issuing Agency	State Issued	Expiration Date
Professional License/ Certificate #	Professional License/Certification Type	Issuing Agency	State Issued	Expiration Date

List any machines, equipment or software programs on which you are qualified and experienced in operating		
List any languages that you speak fluently:	Read/write:	
Do you have a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No State _____		
Military experience? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, what branch?	Rank at separation

GENERAL INFORMATION

Can you, after employment, submit verification of your legal right to work in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you 16 years old or over? (If under 18, state age ___)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Were you previously employed by us?	<input type="checkbox"/> Yes <input type="checkbox"/> No
List any relatives working for us:	
Can you perform the essential functions of the job?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, please explain:	
How did you hear about us?	

EMPLOYMENT HISTORY

List all work experience beginning with the present or most recent job – Do not leave any gaps of time (use back of application, if necessary)

Most Recent Job Held

Name of Employer		Type of Business	
Address	City	State	Zip Code
Dates Employed (from – to)		Title	
Name and Title of Supervisor		Telephone Number	
May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No		Type of Employment <input type="checkbox"/> Part Time <input type="checkbox"/> Full Time	
Brief Description of Duties			
Reason for Leaving			

Previous Employment

Name of Employer		Type of Business	
Address	City	State	Zip Code
Dates Employed (from – to)		Title	
Name and Title of Supervisor		Telephone Number	
May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No		Type of Employment <input type="checkbox"/> Part Time <input type="checkbox"/> Full Time	
Brief Description of Duties			
Reason for Leaving			

Previous Employment

Name of Employer		Type of Business	
Address	City	State	Zip Code
Dates Employed (from – to)		Title	
Name and Title of Supervisor		Telephone Number	
May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No		Type of Employment <input type="checkbox"/> Part Time <input type="checkbox"/> Full Time	

Brief Description of Duties		
Reason for Leaving		

BUSINESS REFERENCES

List three individuals, in addition to listed employment references known by you for at least three years

Name	Occupation/Association	Telephone
1.		()
2.		()
3.		()

Person to be notified in case of emergency (Employees must update this information should any changes occur in the future):

Name	Telephone ()
Address	

ADDITIONAL INFORMATION

Please include any other information you think would be helpful to us in considering you for employment, such as additional work experience, articles/books published, activities, honors received, etc. (You may omit all information that would indicate age, sex, sexual orientation, race, religion, color, national origin, or disability, or any information that may be protected by federal or state law)

APPLICANT INFORMATION

TERMS AND CONDITIONS (PLEASE READ THE FOLLOWING STATEMENT CAREFULLY)

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete the best of my knowledge. I also agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

If hired, I agree to abide by the employer’s policies and procedures which include the Anti-Harassment Policy. I further understand that my employment can be terminated, with or without cause or notice, at any time, at the discretion of the employer or myself. I further understand that no manager or representative of the employer, other than the president, has any authority to enter into any agreement, oral or written, on behalf of the employer for a term of employment or to make any assurance or promise of continued employment.

I hereby authorize the employer to thoroughly investigate my references, work record, education and other matters related to my suitability for employment unless otherwise specified above. I further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

I understand that is considered for employment, after an offer is extended but before finalized the following may be required:

- The employer may obtain a consumer and/or investigative consumer report for employment purposes that may include information as to my character, general reputation, personal characteristics, and mode of living, work experience and performance, along with reasons for termination of past employment. The report may also contain a records check of driving, criminal, credit, education, degrees, professional licenses and/or certification record depending on the position. By signing this application, I authorize the procurement of a consumer and/or investigative consumer report by the employer as part of the post offer but pre-employment background investigation and if hired, at any time during my employment. I also authorize any prior employer to provide references to the employer.
- I understand and agree that I may be required to take a drug and alcohol screening test on a post offer, pre-employment basis.. I hereby give my voluntary consent for a blood and/or urine sample to be collected from me and submitted for testing. I also consent to the release of the test result to the employer for its use. I understand that any positive drug or alcohol result may preclude my employment. Testing will include for marijuana.
- I understand that I may be asked about my criminal history on a post offer, pre-employment basis:

California Applicants: Excludes will be convictions for possession of small amounts of marijuana if such convictions are more than two years old; .any records expunged, annulled, sealed, or discharged under first-offender law; and any records of convictions as a juvenile.

Signature	Date
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