



Employment Application

EMPLOYEE INFORMATION

Full Name: _____ Telephone _____ Email: _____

Address: _____

Are you able to perform the essential functions of the position with or without accommodations?

Yes No

If necessary, for the job, I am to:

Yes No

Work overtime?

Provide a valid Driver's License?

Yes No

I am legally eligible for employment in the U.S.?

Yes No

I am seeking a permanent position: Yes No

Work the following shifts: (check all that apply)

Weekday Weekend Both

I will be able report to work Yes No

Days after being notified I am hired.

EMPLOYMENT HISTORY

List most recent employment first. Include summer or temporary jobs. Be sure all your experience or employers related to this job are listed here, in the summary following this section or on an extra sheet of paper if necessary. No more than 10 years history recommended

Employer name and address:	Position title/duties,	Start date:	End date:
_____	_____	_____	_____
Pay: _____	Supervisor: _____	_____	
Per: _____	Telephone _____	_____	
Employer name and	Position title/duties,	Start date:	End date:
_____	_____	_____	_____
Pay: _____	Supervisor: _____	_____	
Per: _____	Telephone _____	_____	
Employer name and	Position title/duties,	Start date:	End date:
_____	_____	_____	_____
Pay: _____	Supervisor: _____	_____	
Per: _____	Telephone _____	_____	

EDUCATION

Institution name	Year Completed	Field of study	Graduate or degree
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High school			
College /university			
Business /technical			
Additional			

MILITARY

Are you a veteran? Yes No

Duty /specialized training: _____

SKILLS & QUALIFICATIONS

Other qualification has special skills, abilities or honors that should be considered:

Types of computers, software, and other equipment you are qualified to operate or repair:

Professional licenses, certifications or registrations:

Additional Skill, including supervision skill, other languages or information regarding the career /occupation you wish to bring to the employer's attention:

Typing speed: _____ Per minute

REFERENCES

List two personal references who are not relatives or former supervisors.

Name	Address	Telephone	Occupation	Years know

CONTACT

In case of accident or illness, please contact: Name: _____ Day time phone: _____
Address: _____ Relationship: _____

INFORMATION TO THE APPLICANT

As part of our procedure for processing your employment application, your personal and employment references may be checked. If you have missed represented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. You may make a written request for information derived from the checking of your references.

If necessary for employment, you may be required to: supply your birth certificate or other proof of authorization to work in the United States, have a physical examination and/or a drug test, or to sign a conflict of interest agreement and abide by its terms. I understand and agree to the information shown above.

Signature of the Applicant

Date

Equal Employment Opportunity: While many employers are required by federal law to have an Affirmative Action Program, all employers are required to provide equal employment opportunity and may ask your national origin, race and sex for planning and reporting purposes only. This information is optional and failure to provide it will have no effect on your application for employment.