

## 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 name

First name

Middle name

Street Address

Township/Borough

School District

City

State

ZIP

Cell Phone

Social Security #

DOB

Email

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis?  
(You may be required to provide documentation.)

Yes

No

Have you ever been convicted of a Crime?  
(This will not necessarily affect your application.)

Yes

No

If yes, please describe.

### EMPLOYMENT DESIRED

Position applied for

How did you hear of this opening?

Are you presently employed?

Yes

No

May we contact your present employer?

Yes

No

Contact Name

Phone

Are you available for full-time work?

Yes

No

Are you available for part-time work?

Yes

No

Are you available to work at least 2 Saturday's per month?

Yes

No

Date you can start

Desired position

Desired starting salary

Please list applicable skills

## EDUCATION

|                | SCHOOL NAME AND LOCATION | YEAR | MAJOR | DEGREE |
|----------------|--------------------------|------|-------|--------|
| High School    |                          |      |       |        |
| College        |                          |      |       |        |
| Post-College   |                          |      |       |        |
| Other Training |                          |      |       |        |

In addition to your work history, are there are other skills, qualifications, or experience that we should consider?

## EMPLOYMENT HISTORY (Start with most recent employer)

|                    |               |           |                     |    |
|--------------------|---------------|-----------|---------------------|----|
| Company Name       |               |           |                     |    |
| Address            |               | Telephone |                     |    |
| Date Started       | Starting Wage |           | Starting Position   |    |
| Date Ended         | Ending Wage   |           | Ending Position     |    |
| Name of Supervisor |               |           | May we contact? Yes | No |
| Responsibilities   |               |           |                     |    |
| Reason for leaving |               |           |                     |    |

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|                    |               |           |                     |    |
|--------------------|---------------|-----------|---------------------|----|
| Company Name       |               |           |                     |    |
| Address            |               | Telephone |                     |    |
| Date Started       | Starting Wage |           | Starting Position   |    |
| Date Ended         | Ending Wage   |           | Ending Position     |    |
| Name of Supervisor |               |           | May we contact? Yes | No |
| Responsibilities   |               |           |                     |    |
| Reason for leaving |               |           |                     |    |

## REFERENCES

List three personal references, not related to you, who have known you for more than one year.

Name Phone Years Known

Address

Name Phone Years Known

Address

## EMERGENCY CONTACT

In case of emergency, please notify:

Name Phone

Address

## PLEASE READ BEFORE SIGNING:

I certify that all information provided by me on this application is true and complete to the best of my knowledge and that I have withheld nothing that, if disclosed, would alter the integrity of this application.

I authorize my previous employers, schools, or persons listed as references to give any information regarding employment or educational record. I agree that this company and my previous employers will not be held liable in any respect if a job offer is not extended, or is withdrawn, or employment is terminated because of false statements, omissions, or answers made by myself on this application. In the event of any employment with this company, I will comply with all rules and regulations as set by the company in any communication distributed to the employees.

In compliance with the Immigration Reform and Control Act of 1986, I understand that I am required to provide approved documentation to the company that verifies my right to work in the United States on the first day of employment. I have received from the company a list of the approved documents that are required.

I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I hereby acknowledge that I have read and understand the above statements.

Signature

Date