APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. **PLEASE PRINT**, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

Job Applied for	ob Applied for Today's Date		
Are you seeking: Full-time	Part-time	Temporary employment?	
When could you start work?			

General

Last Name	First Name	Ν	/liddle Name		Telephone Numl	oer
Present Street Add	ress	City	St	ate	Zip Code	
Are you 18 years of (If you are	age or older? hired, you may be r				Yes 🗌	No
If hired, can you furr	nish proof you are	eligible to v	work in the	U.S.?	Yes 🗌	No
Have you ever applie	d here before?	Yes 🗌	No 🗌	lf yes, whe	n?	
Were you ever emplo	oyed here?	Yes 🗌	No 🗌	lf yes, whe	n?	
Have you ever been plea of "guilty" or "n					Yes 🗌] No
If yes, give d (A conviction	etails will not necessarily	disqualify an	applicant for	r employment.)		
lf employed, do you or employment outsi					Yes 🗌	No
lf yes, give d	etails					

Page 2 EDUCATION

-	List Name and Address of Schools	Number of Years Completed	Diploma/ Degree/ Certificate
High School or GED			
College or University			
Subjects Studied			
Vocational or Technical			
Subjects Studied			

SPECIAL SKILLS

What skills or additional training do you have that are related to the job for which you are applying?_____

What machines or equipment can you operate that are related to the job for which you are applying?

For Driving Jobs <u>Only</u> : Do you have a va	alid driver's license?		Yes 🗌	No [
Driver's License Number	Class of License	_ Stat	e Licensed I	n	
Have you had your driver's license su in the last 3 years? If yes, give details:	•		Yes 🗌	No [

List professional, trade, business or civic activities and offices held. (Exclude labor organizations and memberships which reveal race, color, religion, national origin, sex, age, disability, or other protected status.) List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

Note: A job offer may be contingent upon acceptable references from current and former employers.

Name, Address and	Emplo	Employed		Pay	Reason for leaving
Telephone of Employer	From (mo/yr)	To(mo/yr)	Start	Final	
			\$	\$	
	Duties			·	
					Supervisor(s)
Title					

Name, Address and	Employed		Pay		Reason for leaving
Telephone of Employer	From (mo/yr)	To(mo/yr)	Start	Final	
			\$	\$	
	Duties		•	•	
					Supervisor(s)
	-				
Title					

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			\$	\$	
	Duties				
					Supervisor(s)
Title					

Nam	e Address	Phone
	Give three references, not relatives or former employers.	
	If yes, please explain:	
	Have you ever been fired from a job or asked to resign?	Yes 🗌 No 🗌
	If yes, whom do you suggest we contact?	
	Are you presently employed?	Yes 🗌 No 🗌
	If yes, give names:	
	Have you worked or attended school under any other names?	Yes 🗌 No 🗌

AFFIDAVIT, CONSENT AND RELEASE PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand I may be required to successfully pass a drug screening examination. I hereby consent to a preand/or post-employment drug screen as a condition of employment, if required.

I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESIDENT OF THE ORGANIZATION HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND THE EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements.

Signature:

Pana /

Date:

This application for employment will remain active for a limited time. Ask the organization's representative for details.