## **Application for Employment**

Equal access to programs, services and employment is available to all persons. Those applicants requiring a reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department. We are an equal opportunity employer.

Position applied for	Application Date/	/
Name:		
Address:		
Home Phone () Cell Phone ()	Email:	
Shiftpreferred □ 1 □ 2 □ 3		
Would you accept full-time work? ☐ Yes ☐ No Would you accept	pt part-time work? □Yes □No	
On what date would you be available for work?		
If necessary, best time to call you is AM/PM  Home	Cellular/Other	
Howwere your eferred to our Company?		
Have you submitted an application here before? $\square$ Yes $\square$ No I f $n$ o , pl	lease give date(s) and position(s):	·
Have you ever been employed here? □Yes □No If yes, please give d	ates:	
Is this application a request for reemployment following an extended military le	eave of absence from our Company?   Yes	□ No
If yes, additional information may be requested.		
If you are under 18 years old, can you provide a work permit if required?	Yes □No	
Are you legally eligible for employment in the United States? (If yes, proof is r	required ifhired.)   Yes   No	
Are you able to perform the "essential functions" of the job for which you are ap This question is not designed to elicit information about an applicant's disability. Please do not prov whether accommodation is necessary. These issues may be addressed at a later stage, to the extent per	oplying (withor without reasonable accommod vide information about the existence of a disability, particu	
$\square Yes  \square No  \square Need more information about the job's "essential function"$	ons" to respond	
Willyoutravelifrequired?	eifrequired? □Yes □No	
If they have been explained to you, are you able to meet the attendance require	ements of the position?   Yes   No [	□N/A
Have you ever been bonded? □Yes □ No		
Please provide your driver's license number; if driving is required for this	sjobState	·
Have you entered into an agreement with any former employer or other party (su	uch as a noncompetition agreement) that migh	t, in any way,
restrict your ability to work for our Company?		
If yes, please explain:		

### **Employment Experience**

Employer	 	
Supervisor's Name	 _ Phone (	)
Dates employed: (MM/YY)/ to/		
Address	 	
Job Title		
Work Performed	 	
Reason for leaving	 	
What did you like most about your position?	 	
What were the things you liked least about the position?	 	
Employer		
Supervisor's Name		
Dates employed: (MM/YY)/ to/		
Address	 	
Job Title		
Work Performed	 	
Reason for leaving	 	
What did you like most about your position?		
What were the things you liked least about the position?	 	
Employer		
Employer		
Supervisor's Name	_ Filone (	)
Dates employed: (MM/YY) to/		
Address  Job Title		
Work Performed		
What did you like most about your position?		
What did you like most about your position?  What were the things you liked least about the position?		
man were the things you fixed least about the position:	 	

# Explain any gaps in your employment, other than those due to personal illness, injury or disability. Have you ever been fired or asked to resign from a job? ☐ Yes ☐ No If yes, please explain:\_\_\_\_\_ **Education Background** \_\_\_\_\_ Location: \_\_\_\_\_ High School: \_\_\_\_\_ \_\_\_\_\_ Did you graduate? Yes No Degree or diploma \_\_\_\_\_ Course of Study \_\_\_\_ \_\_\_\_\_ Location: \_\_\_\_ College: Course of Study \_\_\_\_\_\_ Did you graduate? ☐ Yes ☐ No Degree or diploma \_\_\_\_\_ Location: Graduate School: \_\_\_\_\_ Did you graduate? Yes No Degree or diploma \_\_\_\_\_ Course of Study \_\_\_\_ Vocational Training/Other: \_\_\_\_\_\_ Location: \_\_\_\_\_ Course of Study \_\_\_\_\_\_ Did you graduate? \( \subseteq \text{ Yes} \subseteq \text{ No Degree or diploma \_\_\_\_\_\_\_\_ Continuing Education: \_\_\_\_\_ Special Training or Skills Languages, machine operation, etc., that would be of benefit in the job for which you are applying. Social Security Number SS# \_\_\_\_\_/ \_\_\_\_ The Company will make reasonable efforts to safeguard the privacy of this information

Employment Experience (continued)

and will use it only for employment purposes.

#### References

List names and telephone numbers of three business/work references who are **not** related to you. If not applicable, list three school or personal references who are **not** related to you.

Name	Title	Relationship to you	Telephone	Email	Years Known

### Applicant Statement

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false or misleading information, omissions or misrepresentations are discovered, myapplication may be rejected, and if I am employed, my employment may be terminated at any time.

If hired, I agree to conform to the Company's rules and regulations, and I understand that these rules and/or the employee handbook do not form a contract of employment either express or implied, and I agree that my employment and compensation can be terminated, with or without cause and with or without notice, at any time, at either my or the Company's option.

I also understand and agree that the terms and conditions of my employment may be changed, with or without cause and with or without notice, at any time by the Company. I understand that no Company representative, other than its president, and then only when in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the forgoing.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives for seeking, gathering and using truthful and nondefamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

I also understand that, if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States as required by federal immigration laws.

This Company does not tolerate unlawful discrimination or harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state or local law. No question on this application is used to limit or exclude an applicant from employment consideration on any basis prohibited by applicable federal, state or local law.

Applicant's Signature	Date _	/	/
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