

Employment Application

Full Name:					
Last First M.I. Address:					
Street Address Apartment/Unit #					
City State ZIP Code					
Phone: () Email Address: (optional)					
Date Available:					
Sunday Monday Tuesday Wednesday Thursday Friday Availability From:	Saturday				
Availability To:					
Position Applied for:					
YES NO Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.?	NO 🗌				
Have you ever worked for this company? ☐ If so, when?					
Have you ever been convicted of a felony? YES NO If yes, explain:					
Education					
High School: Address:					
Subjects Studied: Did you graduate?					
College: Address:					
Subjects Studied: Did you graduate?					
Other: Address:					
Subjects Studied: Did you graduate?					
References					
Please list three references.					
Full Name: Relationship:					
Company: Phone: ()					
Address:					
Full Name: Relationship:					
Company: Phone: _()					
Address:					
Full Name: Relationship:					
Company: Phone: _()					



Previous Employment					
Company:		Phone: ()			
Address:		Supervisor: _			
Job Title:					
Responsibilities:					
From: To:	Reason for Leaving:				
	1		_		
Company:		Phone: ()			
Address:		Supervisor:			
Job Title:	Starting Wage:\$		Ending Wage: _\$		
Responsibilities:					
From: To:					
	1				
Company:		Phone: ()			
Address:		Supervisor: _			
Job Title:	Starting Wage: _\$		Ending Wage: _\$		
Responsibilities:					
From: To:	Reason for Leaving:				
	Military Service				
Branch:		From:	To:		
Rank at Discharge:	Type of Di	scharge:			
If other than honorable, explain:					
	Disclaimer and Signature				
I certify that my answers are true and complete to the best of my knowledge.					
If this application leads to employment, I understand that any false or misleading information in my application or interview may result in my termination.					
Signature:		_	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 pre-and/or post-employment drug screen as a condition of employment, if required.