JOB APPLICATION

Company: _____. Address: _____.

Thank you for your interest in working at _____ (the "Company"). Please print clearly in ink and answer every question that applies to you. Write "none" where a question does not apply, and use a separate sheet if you need more room.

1. POSITION

Position you are applying for: _____. Work location: _____.

Type of work you want (check each that applies): [ ] Full-time [ ] Part-time [ ] Seasonal [ ] Temporary

Date you can start: _____. Pay you are seeking for this position: _____.

2. APPLICANT INFORMATION

Full name: _____. Preferred first name, if different: _____.

Street address: _____. City, state and ZIP code: _____.

Phone: _____. Email: _____.

Are you legally authorized to work in the United States? [ ] Yes [ ] No

Will you now or in the future need the Company to sponsor you for an employment visa? [ ] Yes [ ] No

Have you worked for or applied to the Company before? [ ] Yes [ ] No. If yes, when and for what position: _____.

How did you hear about this position? _____

3. AVAILABILITY

Hours per week you want to work: _____.

Days and hours you are available to work: Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____ Saturday _____ Sunday _____

4. EDUCATION

List the schools and training you want us to consider. You do not need to give dates of attendance or graduation.

High school or equivalent (name and city): _____. Diploma or equivalent completed? [ ] Yes [ ] No

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College or university (name and city): _____. Area of study: _____. Degree earned: _____.

Trade school, apprenticeship or other training: _____. Certificate or credential earned: _____.

5. EMPLOYMENT HISTORY

List your current or most recent job first. You may include part-time, volunteer and military work. Do not include your pay at any job.

Employer 1. Company name: _____. Address: _____. Phone: _____.

Job title: _____. Supervisor's name: _____. Dates employed (month and year): from _____ to _____.

Main duties: _____. Reason for leaving: _____. May we contact this employer? [ ] Yes [ ] No

Employer 2. Company name: _____. Address: _____. Phone: _____.

Job title: _____. Supervisor's name: _____. Dates employed (month and year): from _____ to _____.

Main duties: _____. Reason for leaving: _____. May we contact this employer? [ ] Yes [ ] No

Employer 3. Company name: _____. Address: _____. Phone: _____.

Job title: _____. Supervisor's name: _____. Dates employed (month and year): from _____ to _____.

Main duties: _____. Reason for leaving: _____. May we contact this employer? [ ] Yes [ ] No

6. SKILLS AND QUALIFICATIONS

This position requires: _____. Do you meet these requirements? [ ] Yes [ ] No. If not, explain: _____.

Licenses or certifications related to this job (name, issued by and expiration date):

_____

Other skills, training or experience related to this job:

_____

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7. DRIVING (COMPLETE ONLY IF THE POSITION INVOLVES DRIVING)

Do you have a valid driver’s license? [ ] Yes [ ] No. Driver’s license number: _____. Issuing state: _____. License class: _____. Expiration date: _____.

Types of vehicles you have driven for work: _____.

In the last 3 years, has any driver’s license you held been suspended, revoked or denied? [ ] Yes [ ] No. If yes, explain: _____.

Moving violations or vehicle accidents in the last 3 years (date and what happened), or "none": _____.

8. MILITARY SERVICE (OPTIONAL)

Complete this section if you want us to consider your military service and training. You do not need to tell us the type of discharge.

Branch of service: _____. Dates of service: from _____ to _____. Training, skills or duties that relate to this job: _____.

9. REFERENCES

List people who know your work, education or character. Please do not list relatives.

Reference 1. Name: _____. Relationship to you: _____. Company and job title: _____. Phone: _____. Email: _____. Years known: _____.

Reference 2. Name: _____. Relationship to you: _____. Company and job title: _____. Phone: _____. Email: _____. Years known: _____.

Reference 3. Name: _____. Relationship to you: _____. Company and job title: _____. Phone: _____. Email: _____. Years known: _____.

10. NOTICES TO APPLICANTS

Equal Employment Opportunity. The Company is an equal opportunity employer. It considers applicants for employment without regard to race, color, religion, sex, national origin, age, disability or genetic information, or any other characteristic protected by federal, state or local law.

Accommodation. If you need a reasonable accommodation because of a disability to complete this application or take part in the hiring process, please contact _____.

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11. APPLICANT CERTIFICATION AND AUTHORIZATION

By signing below, I confirm and agree that:

The information in this application, and in any resume or other papers I attach to it, is true and complete to the best of my knowledge.

If I give false or misleading information, or leave out important facts, the Company may turn down my application or, if I am hired, end my employment.

I authorize the Company to contact the employers, schools and references I listed to check the information I gave, except any employer I marked as one not to contact, and I authorize them to answer the Company's questions about me.

This application is not a contract of employment and does not promise me a job.

Any background check through a consumer reporting agency will be done only after the Company gives me a separate written disclosure and I authorize it in writing.

SIGNATURES

Applicant

Signature: _____ Date: _____

Printed Name: _____

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