



## APPLICATION FOR EMPLOYMENT

All applicants are considered for all positions without regard to race, religion, color, sex, gender, sexual orientation, pregnancy, age, national origin, ancestry, physical/mental disability, medical condition, military/veteran status, genetic information, marital status, ethnicity, citizenship or immigration status or any other protected classification, in accordance with applicable federal, state, and local laws. Please print.

Position(s) Applied for		Date of Application		
Print Name (Last, First, & Middle)				
Street Address		City	State	Zip Code
Main Phone Number	Alternate Phone Number	Email		

### EMPLOYMENT EXPERIENCE

Please list the names of your present or previous employers in chronological order with present or most recent employer listed first.

Name of Employer		Supervisor	May we contact?	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Street Address				
Phone Number		Dates Employed (Month/Year)		
		From	To	
Job Title and Duties		Reason for Leaving		

Name of Employer		Supervisor	May we contact?	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Street Address				
Phone Number		Dates Employed (Month/Year)		
		From	To	
Job Title and Duties		Reason for Leaving		

Please list any other experience, job related skills, additional languages, or other qualifications that you believe should be considered in evaluating your qualifications for employment.

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**PERSONAL REFERENCES**

Please list three people who know you well.

Name and Title	Relationship and Years Acquainted	Phone Number or Email

**GENERAL INFORMATION**

1. On what date are you available to begin work? \_\_\_\_\_
2. Days/Hours available to work:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

3. Are you available to work?     Full-time     Part-time     Temporary     Seasonal
4. Are you at least 18 years old?..... Yes  No
5. Are you able to perform the essential job functions of the job for which you are applying with or without reasonable accommodation?..... Yes  No

a. Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for qualified applicants/employees to perform essential job functions.

**Applicant Statement and Agreement**

Please read and initial each paragraph below. If there is anything that you do not understand, please ask.

\_\_\_\_\_ I hereby authorize the Company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the prior employers and references I have listed to disclose to the Company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

**MY SIGNATURE BELOW ATTESTS TO THE FACT THAT I HAVE READ, UNDERSTAND, AND AGREE TO ALL OF THE ABOVE TERMS.**

**Signature:**

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**Name (print):** \_\_\_\_\_ **Date:** \_\_\_\_\_