

APPLICATION FOR EMPLOYMENT

Please Print Clearly and Answer all Questions. Resumes are not a substitute for a completed Application

TO APPLICANT: We appreciate your interest in our Companies. A clear and full understanding of your background and work history will aid in placing you in a position that best meets your qualifications.

Applicants will be considered without discrimination because of race, color, sex, age, religion, national origin, marital status, disability, veteran's status, or other legally protected status.

Position applying	n applying for Date						
Name	Telephone Number ()						
Present Address	(Street, Apt. or Unit No.)						
City / State / Zip		How	How Long Here				
Personal Email Address							
Are you legally eligible for employment in the United States? Yes □ No □ Desired Salary							
Are you 18 years of age or older? Yes □ No □ If no, please state your age							
Are you seeking Full or Part-time work? What shift?							
When are you available to begin work?							
List your computer, foreign language skills and/or work experience which you feel qualifies you for the job for which you are applying:							
If a license is required for the position for which you are applying (drivers or other), please list the following:							
License Number:	ense Number: State of Issuance:		License Type:				
Education	School Name and Location	Course of Study	Graduate?	Years	Degree/Diploma		
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Education	School Name and Location	Course of Study	Graduate?	Years	Degree/Diploma
High School					
College					
Post-Graduate					
Bus./Tech./Trade					

LIST BELOW ALL PRESENT AND PAST EMPLOYMENT BEGINNING WITH MOST RECENT.

Name & Address of Company (Describe business type)	Dates Employed					
	From	To				
	Job Title					
Phone						
Supervisor's Name						
Reason Left						
Duties						
Name & Address of Company (Describe business type)	Dates Employed					
	From	To				
	Job Title					
Phone						
Supervisor's Name						
Reason Left						
Duties						
Name & Address of Company (Describe business type)	Dates Employed					
(2000/// Submission (2000/	From	То				
	Job Title					
Phone						
Supervisor's Name						
Reason Left						
Duties						
I certify that all the information on this application, my resume, or an information will result in diagraph	ny supporting documents is corre	ct, and I understand that any				
misrepresentation or omission of any information will result in disqual termination.	incation from consideration for en	ipioyment or, ii employed, my				
termination.						
I understand that this application is not a contract, offer or promise of	employment. If hired, I will be abl	e to resign at any time for any				
reason. Likewise, the Company can terminate my employment at any	time, with or without any reason.					
I authorize the Company or its agents to investigate all statements co						
that a background check may be made including, but not limited to general public records which will provide information concerning my						
employers, educational institutions or other reference providers to furnish all information pertaining to my work or educational record. I release my former employers, educational institutions, supervisors, and references from all liability on account of furnishing						
information to this company or its agents.	,	,				
I understand that, as a condition of employment I may be required to						
and/or an arbitration agreement and I hereby agree to arbitrate al						
employment related matters rather than resolving them in court or or may establish, a drug-free workplace or a post-accident drug-testing p						
employment I agree to work under the conditions requiring a drug-free						
may be subject to urinalysis and/or blood screening or other medically						
controlled drugs. If detected, the offer of employment will be withdraw						
drug tests is a condition of continual employment and I agree to un	dergo random, fitness for duty, re					
suspicion alcohol and drug testing. Refusal to take such tests when a	sked may result in termination.					
This application is current for only sixty (60) days. At the conclusion	of this time, if you have not bear	rd from the Company and still				
wish to be considered for employment it will be necessary for you to complete a new application.						

Applicant Signature_____ Date _____