

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY
BECAUSE OF VISA OR IMMIGRATION STATUS?

YES

NO

PROOF OF CITIZENSHIP OR IMMIGRATION STATUS WILL BE REQUIRED UPON EMPLOYMENT.

CAN YOU TRAVEL TO OTHER WHA LOCATION(S) TO WORK TEMPORARILY IF MANAGEMENT
REQUESTS YOU TO?

YES

NO

EDUCATION

SCHOOL	NAME & ADDRESS	YEARS ATTENDED	GRADUATED?	COURSE / MAJOR
HIGH SCHOOL				
COLLEGE UNDER-GRADUATE				
COLLEGE GRADUATE / PROFESSIONAL				
BUSINESS OR TRADE				
OTHER				

WORK EXPERIENCE

START WITH YOUR PRESENT OR LAST JOB. INCLUDE ANY JOB RELATED MILITARY SERVICE ASSIGNMENTS AND VOLUNTEER ACTIVITIES. YOU MAY EXCLUDE ORGANIZATIONS WHICH INDICATE RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, DISABILITIES OR OTHER PROTECTED STATUS.

EMPLOYER	DATES EMPLOYED		WORK PERFORMED
	FROM	TO	
ADDRESS STREET CITY ZIP CODE			
TELEPHONE NUMBER(S)	HOURLY RATE / SALARY		
	FINAL		
JOB TITLE			
SUPERVISOR			
REASON FOR LEAVING	MAY WE CONTACT?		
	YES NO		

EMPLOYER	DATES EMPLOYED		WORK PERFORMED
	FROM	TO	
ADDRESS STREET CITY ZIP CODE			
TELEPHONE NUMBER(S)	HOURLY RATE / SALARY		
	FINAL		
JOB TITLE			
SUPERVISOR			
REASON FOR LEAVING	MAY WE CONTACT?		
	YES NO		

WORK EXPERIENCE CONT.

EMPLOYER		DATES EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS	STREET	CITY	ZIP CODE	
TELEPHONE NUMBER(S)		HOURLY RATE / SALARY		
		FINAL		
JOB TITLE				
SUPERVISOR				
REASON FOR LEAVING			MAY WE CONTACT?	
			YES	NO

EMPLOYER		DATES EMPLOYED		WORK PERFORMED
		FROM	TO	
ADDRESS	STREET	CITY	ZIP CODE	
TELEPHONE NUMBER(S)		HOURLY RATE / SALARY		
		FINAL		
JOB TITLE				
SUPERVISOR				
REASON FOR LEAVING			MAY WE CONTACT?	
			YES	NO

COMMENTS: INCLUDE EXPLANATION OF ANY GAPS IN EMPLOYMENT HISTORY

DESCRIBE ANY SPECIALIZED TRAINING, APPRENTICESHIP, SKILLS AND EXTRA-CURRICULAR ACTIVITIES.

ADDITIONAL INFORMATION

OTHER QUALIFICATIONS <i>SUMMARIZE SPECIAL JOB-RELATED SKILLS AND QUALIFICATIONS ACQUIRED FROM EMPLOYMENT OR OTHER EXPERIENCE.</i>

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I understand I will be asked and expected to supply personal references once considered for employment.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such a change is specifically acknowledged in writing by an authorized executive of this organization.

SIGNATURE OF APPLICANT

DATE

PERSONAL REFERENCES FOR: _____

DATE: _____

NAME: _____

ADDRESS: _____

PHONE NUMBER(S): _____

RELATIONSHIP TO APPLICANT: _____

OCCUPATION: _____

BEST TIME TO CALL: _____

NAME: _____

ADDRESS: _____

PHONE NUMBER(S): _____

RELATIONSHIP TO APPLICANT: _____

OCCUPATION: _____

BEST TIME TO CALL: _____

NAME: _____

ADDRESS: _____

PHONE NUMBER(S): _____

RELATIONSHIP TO APPLICANT: _____

OCCUPATION: _____

BEST TIME TO CALL: _____

