### **Sample Employment Application**

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

<b>APPL</b>	<b>ICATION</b>	FOR	<b>EMPL</b>	OYMENT

PLEASE COMPLETE I	PAGES 1-5.		DATE		
Name					
	Last	First	Middle		Maiden
Present address	Number	Street	City State	Zip	
How long			,	·	
Telephone ( )					
	age				
			Days/hours ava No Pref Mon Tue Wed	Thur Fri	
How many hours can yo	ou work weekly?		Can you work	nights?	
Employment desired	□FULL-TIME ONLY	□PART-TIME (	ONLY □FU	JLL- OR PART-	TIME
When available for work	k?				
TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)		OF YEARS PLETED	MAJOR & DEGREE
High School		, , , , , , , , , , , , , , , , , , , ,			
College					
Bus. or Trade School					
Professional School					
-	1				<b>.</b>
HAVE YOU EVER BEE	N CONVICTED OF A FEL	_ONY? □ No	☐ Yes		

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D. 10 171011 FOR F1101 0\/11717	

#### APPLICATION FOR EMPLOYMENT

DO YOU HA	AVE A DRIVE	R'S LICE	NSE?	☐ Yes	□ No					
What is you	r means of tra	ınsportati	ion to work	k?						
	nse ate				f issue _		☐ Operator	□ Comr	mercial (CDL)	□Chauffeur
-	ad any accide			-		_			any?	
Have you ha	ad any moving	g violatior	ns during t	the past t				How Ma	any?	
					OFFI	CE ONLY				
Typing	☐ Yes ☐ No		_WPM		10-key		Word Proces	•	☐ Yes ☐ No	WPM
Personal Computer	□ Yes □ No	PC Mac				Other Skills				
Computer	-110	IVIGO								
Please list to	wo references	other th	an relative	es or prev	vious emp	loyers.				
Name						Name _				
						Position				
Company _							у			
Address						Address				
_										
Telephone	( )					Telephor	ne <u>( )</u>			
	ce below to s which you are			itional inf	ormation	necessary	to describe you	ır full qual	lifications for th	e specific

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APPLICATION FOR	REMPLOYMENT
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MIL	ITARY						
HAVE YOU EVER BEEN IN THE ARMED FORCES?  ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?	☐ Yes ☐ No	No					
Specialty Date E							
Work Please list your work experience for the past five years beginning with your most recent job held.  Experience If you were self-employed, give firm name. Attach additional sheets if necessary.							
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary				
City, State, Zip Code Phone number		From	Start				
		То	Final				
	Your last job title						
Reason for leaving (be specific)							
company.							
Name of employer Address	Name of last supervisor	Employment dates	Pay or salary				
City, State, Zip Code Phone number		From	Start				
		То	Final				
Your Last Job Title							
Reason for leaving (be specific)							
List the jobs you held, duties performed, skills used or learned company.	, advancements or pro	omotions while you wor	ked at this				

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Work

#### APPLICATION FOR EMPLOYMENT

Please list your work experience for the **past five years** beginning with your most recent job held.

Name of employer Address		Name of last supervisor	Employment dates	Pay or salary
City, State, Zip Code Phone number		·	From	Start
. Helle Hallige.			То	Final
		Your last job title		
Reason for leaving (be specific)				
List the jobs you held, duties performed, ski company.	ils used or lea	irned, advancements or pr	omotions while you wo	rked at this
Name of employer		Name of last	Employment dates	Pay or salary
Address		supervisor	Employment dates	1 dy or saidry
City, State, Zip Code Phone number			From	Start
			То	Final
		Your last job title		
Reason for leaving (be specific)				
Reason for leaving (be specific)  List the jobs you held, duties performed, ski company.	lls used or lea	rned, advancements or pr	omotions while you wo	rked at this

#### AGREEMENT (PLEASE READ CAREFULLY BEFORE SIGNING)

I certify that all the information on this application is accurate and complete to the best of my knowledge and understand that misleading or false statements will constitute sufficient cause for refusal of hire or termination of my employment.

I understand that neither the acceptance of this application nor the subsequent entry into any type of employment relationship with [the Company] creates an actual or implied contract of employment. I understand that, if I accept employment with [Company Name], it will be on an at-will basis. This means that either [Company Name] or I have the right to terminate the employment relationship at any time, for any reason, with or without cause.

I agree to submit to drug and alcohol testing, if requested by [Company Name]. I release [Company Name], and its employees, plus other persons or companies, from any and all liability arising out of or related in any way to such testing.

I authorize [Company Name] to investigate information concerning my education, employment experiences and all other aspects of my background relevant to my proposed employment. I release [Company Name] and its employees from all liability arising from such investigation.

Signature of applicant_	_ Date: _	
_		

[Company Name] is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with [Company Name] depends solely on your qualifications.