

## Employment Application

We consider applicants for all positions on the basis of qualifications and without regard to race, color, religion, sex, national origin, age, marital status, veteran status, disability, sexual orientation, citizenship status or use of lawful products during non-work hours and any other legally protected status.

Position(s) Applied For: _____		Date of Application: _____	
How did you learn about our company? (check one)			
Advertisement <input type="checkbox"/>	Website <input type="checkbox"/>	Friend <input type="checkbox"/>	Current Employee <input type="checkbox"/>
Other _____			

Last Name _____	First Name _____	Middle Name _____
Address _____		
City _____	State _____	Zip _____
Home Phone _____	Business Phone _____	

Are you currently employed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
May we contact your present employer for references?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you legally qualified to work in the United States? (Proof of citizenship or immigration status will be required upon employment)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been convicted of a felony?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever had any job-related training in the United States Military?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes please specify: _____		

### Special Skills and Qualifications (Summarize special skills, certifications and training)

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### Education

High School		
Name _____	Address _____	
Year Completed: <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	Diploma/Degree Yes <input type="checkbox"/> No <input type="checkbox"/>	Course of Study: _____
College		
Name _____	Address _____	
Year Completed: <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	Diploma/Degree Yes <input type="checkbox"/> No <input type="checkbox"/>	Course of Study: _____
Technical School		
Name _____	Address _____	
Year Completed: <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	Diploma/Degree Yes <input type="checkbox"/> No <input type="checkbox"/>	Course of Study: _____
Other		
Name _____	Address _____	
Year Completed: <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	Diploma/Degree Yes <input type="checkbox"/> No <input type="checkbox"/>	Course of Study: _____

**Employment Experience** ( Start with your present or most recent employer)

Employer _____	Telephone _____
Address _____	
Position(s) _____	
Starting Salary _____	Ending Salary _____
Dates of Employment _____ to _____	Select one:    Fulltime <input type="checkbox"/> Part-time <input type="checkbox"/>
Supervisor Name _____	Title _____
Reason for Leaving _____	
Description of primary responsibilities _____	

Employer _____	Telephone _____
Address _____	
Position(s) _____	
Starting Salary _____	Ending Salary _____
Dates of Employment _____ to _____	Select one:    Fulltime <input type="checkbox"/> Part-time <input type="checkbox"/>
Supervisor Name _____	Title _____
Reason for Leaving _____	
Description of primary responsibilities _____	

Employer _____	Telephone _____
Address _____	
Position(s) _____	
Starting Salary _____	Ending Salary _____
Dates of Employment _____ to _____	Select one:    Fulltime <input type="checkbox"/> Part-time <input type="checkbox"/>
Supervisor Name _____	Title _____
Reason for Leaving _____	
Description of primary responsibilities _____	

**References** (Please list 3 personal references not related to you)

Name _____	Address _____	
Phone _____	Type of Acquaintance _____	Years Known _____
Name _____	Address _____	
Phone _____	Type of Acquaintance _____	Years Known _____
Name _____	Address _____	
Phone _____	Type of Acquaintance _____	Years Known _____

Applicants Signature (Please read carefully)

- I understand that employment at The Walker Group will be subject to my submitting documentary proof of my identity and legal eligibility to work.
- I understand that The Walker Group follows an "employment at will" policy, in that I or The Walker Group may terminate my employment at any time or for any reasons consistent with applicable state or federal law.
- I understand that this application is not a contract of employment.
- I understand that The Walker Group will thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools, and firms named therein, except my current employer if so noted, to provide any information requested about me, and I released them from all liability for damage in providing this information.
- I certify that all the statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

Signature \_\_\_\_\_ Date \_\_\_\_\_