



## Application for Employment

**NOTE: SATURDAYS ARE REQUIRED**

Date \_\_\_\_\_

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

### INFORMATION

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### POSITION

Position Title: \_\_\_\_\_ How did you hear of this opening? \_\_\_\_\_  
Desired Start Date? \_\_\_\_\_ Desired Wage \$ \_\_\_\_\_  
Desired Hours?  Full-Time  Part-Time  Saturdays only  
If seeking part-time employment, what days and hours are you available?  
Days:  Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  
Hours: \_\_\_\_\_

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis? (You may be required to provide documentation.)

Yes  No

Are you capable of lifting and carrying up to 40 lbs.?

Yes  No

Have you ever been convicted of a felony? (This will not necessarily affect your application.)

Yes  No

If yes, please describe conditions. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**EDUCATION**

	SCHOOL NAME & LOCATION	YEAR	MAJOR	DEGREE
HIGH SCHOOL				
COLLEGE				
POST-COLLEGE				
OTHER TRAINING				

In addition to your work history, are there other skills, qualifications, or experience that we should consider?

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**EMPLOYMENT HISTORY #1 – Most recent**

Company Name: Supervisor: May we contact?  Yes  No  
Address: Phone:  
Date Started: Starting Position: Starting Wage:  
Date Ended: Ending Position: Ending Wage:  
Responsibilities:  
Reason for leaving:

**EMPLOYMENT HISTORY #2**

Company Name: Supervisor: May we contact?  Yes  No  
Address: Phone:  
Date Started: Starting Position: Starting Wage:  
Date Ended: Ending Position: Ending Wage:  
Responsibilities:  
Reason for leaving:

**EMPLOYMENT HISTORY #3**

Company Name: Supervisor: May we contact?  Yes  No  
Address: Phone:  
Date Started: Starting Position: Starting Wage:

Date Ended:

Ending Position:

Ending Wage:

Responsibilities:

Reason for leaving:

Attach additional information if necessary.

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis.

Signature:

Date: