Employment Application Form

General Information

Last Name  First Name  Initial  Social Security No.

Address  Home Telephone

City, State, Zip  Message Telephone

Position Applied For  Salary Desired

Date Available  Hours Available

☐ FULLTIME  ☐ PARTIME  ☐ TEMPORARY  ☐ PERMANENT

Are you able to perform the essential job functions of the position you are applying for with or without reasonable accommodations?  ☐ YES  ☐ NO

If hired, will you be able to work overtime?  ☐ YES  ☐ NO

Are you at least 18 years of age?  ☐ YES  ☐ NO

If under 18, do you have a work permit?  ☐ YES  ☐ NO

Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by court? A yes response does not automatically disqualify your application. If yes, please explain.  ☐ YES  ☐ NO

Education Information

School  Address  Major Studies  Degree, Diploma, License or Certificate (list type and date)

High School

Vocation/Business/Other

College/university

College/university

Graduate

Other Special Knowledge, Skills or Qualifications (list any construction or manufacturing equipment, office skills, technical equipment or training)

Military Service (list dates, ranks and training)

For Clerical Applicants Only:

Do you type?  ☐ NO  ☐ YES: ___________ WORDS PER MINUTE

Computer Skills (hardware/software)
## Employment History

List all employers, starting with the most recent position. All information must be completed. You may attach a resume, but not in place of completing the required information.

### Most Recent Employer

<table>
<thead>
<tr>
<th>Is this your current employer?</th>
<th>NO</th>
<th>YES</th>
</tr>
</thead>
<tbody>
<tr>
<td>May we contact this employer for references?</td>
<td>NO</td>
<td>YES</td>
</tr>
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<thead>
<tr>
<th>Employed From</th>
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<th>Job Title</th>
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<tr>
<th>Employer Name</th>
<th>Employer Address</th>
<th>Supervisor’s Name</th>
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**Job Duties and Responsibilities**

**Reason for Leaving**

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Other Information

Volunteer Activities (list organization, type of service, dates)

Hobbies, Interests (optional)

Certification and Authorization

The above information is true and correct.

I authorize the Company to inquire into my education, past employment history, and references as needed to research my qualifications for this position.

If employed, I will be required to provide original documents which verify my identity and right to work in the United States under the Immigration Reform and Control Act (IRCA) of 1986. The document(s) provided will be used for the completion of Form I-9.

I hereby acknowledge that I have read and agree to the above statements.

____________________________________________________________________  ______________________________________________________________________
Signature                                      Date