APPLICATION



FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

		(Please Print)			
Position (s) Applied For			Date of Application		
How Did You Learn About Us?					
Advertisement Employment Agency	Friend Relative	Inquiry Other			
Last Name		First Name		Mic	ddle Name
Address Number	Street	City		State	Zip Code
Telephone Number (s)			Email Address		
Best time to contact you at home is					 .
If you are under 18 years of age, caeligibility to work?	an you provide required pro-	of of your		Yes	No
Have you ever filed an application If Yes, give date				Yes	No
Have you ever been employed with If Yes, give date				Yes	No ·
Have you ever been convicted of a	crime?			Yes	No
Do you have a valid driver's licens State Issued	;e?			Yes	No
Do any of your friends or relatives If Yes, state name, relationship and			-	Yes	No
Are you currently employed?				Yes	No
May we contact your present empl	oyer?			Yes	No
Are you authorized to lawfully wo Evidence of work autho	rk in the United States of A rization will be required up			Yes	No
Date available for work					
Are you available to work:	Full Tim Part Tim Tempora	ne	(Please indicate 1 2 3 (Please indicate Mornings (Please indicate dates avail	Afternoon Evenin	
Are you currently on "lay-off" stat	us and subject to recall?			Yes	No
Can you travel if a job requires it?				Yes	No

School Name/Address of School Courseled Study School Years Completed Diploma/Degree Completed Undergraduate College Image: School	Education								
Undergraduate College Graduate/Professional Other/Specify 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 Address Telephone Number(s) Starting/Present Job Title Supervisor Reason For Leaving Telephone Number(s) Starting/Present Job Title Supervisor Reason For Leaving Starting/Present Job Title Supervisor Starting/Present Job Title Supervisor Reason For Leaving Starting/Present Job Title Supervisor Starting/Present Job Title Supervisor Reason For Leaving Starting/Present Job Title Supervisor May We Cometal Supervisor May We Cometal Supervisor Reason For Leaving Starting/Present Job Title Supervisor May We Cometal Supervisor Reason For Leaving Starting/Present Job Title Supervisor May We Cometal Supervisor May We Cometal Supervisor None Supervisor	School	Name/Add	dress of School	Course of Study			Diploma/Degree		
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May We Coulter Park	Undergraduate College								
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 Address Telephone Number(s) Supervisor May We Contact	Graduate/Professional								
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 Address Telephone Number(s) Starting/Present Job Title Supervisor Reason For Leaving Starting/Present Job Title Starting/Present J	Other/Specify								
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	Supervisor			1					
Comments: Include explanation of any gaps in employment	Reason For Leaving			May We Cont	act Y	es 🔲 No			
	Comments: Include explanation of an	y gaps in employmen	nt						

Describe any specialized training, apprenticeship, skills and extra-curricular activities.	
Describe any job-related training received in the United States military.	
List professional, trade, business or civic activities and offices held.	
You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:	
ADDITIONAL INFORMATION	
Other Qualifications Summarize special job-related skills and qualifications acquired from employment or other experience	
SPECIALIZED SKILLS (Skills/Equipment Operated)	
TerminalSpreadsheet/Database (List) Production/Mobile Machinery Other (List)	
PC/MACWord Processing	
TypewriterShorthand	
WPM WPM	
State any additional information you feel may be helpful to us in considering your application for employment.	
Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.	C
Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved	in the
Job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been give YesNo	

PERSONAL/PROFESSIONAL REFERENCES		Do not include family members or past supervisors.				
Name	Telephon	e Number	Best Time To Call	Occupation		
1.						
2.						
3.						
APPLICANT'S STATEMENT	1					
I certify that answers given herein are true an	d complete.	<u> </u>				
I authorize investigation, including back groumay be necessary in arriving at an employme		statements and	d replies contained in t	his application for employment as		
This application for employment shall be conconsidered for employment beyond this time						
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 change is specifically acknowledged in writing by an authorized executive of this organization.						
In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.						
Signature of Ap	pplicant	_		Date of Application		

Additional Information