



601 N. Ringold Street, Janesville, WI 53545 • 608-436-9003 • jeff@distinctivecraftsman.com

APPLICATION FOR EMPLOYMENT

We consider applications for all positions without regard to race, color, religion, creed, sex, national origin, disability, sexual orientation, citizenship status or any other legally protected status.

(PLEASE PRINT)

Position Applying For:

Date of Application:

How Did You Learn About Us?

- | | | |
|--|-----------------------------------|--------------------------------------|
| <input type="checkbox"/> Advertisement | <input type="checkbox"/> Relative | <input type="checkbox"/> Inquiry |
| <input type="checkbox"/> Employment Agency | <input type="checkbox"/> Friend | <input type="checkbox"/> Other _____ |

Last Name:

First Name:

Middle Name:

Address Number

Street

City

State

Zip Code

Telephone Numbers

(Cell)

(Home)

Social Security Number (Voluntary)

- Best number to contact you? _____ cell or home _____ AM
Best time to contact you? _____ : _____ PM
- If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No
- Have you ever filled an application with us before? Yes No
- If Yes, give date applied: _____
- Do any of your friends or relatives work here? Yes No
- Are you currently employed? Yes No
- May we contact your present employer? Yes No
- Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?
(Proof of citizenship or immigration status will be required for employment) Yes No
- Date available for work _____ What is your desired salary range? \$ _____ - _____
- Are you available to work: Full-Time
 Part-Time (Please indicate: Mornings Afternoon Evenings)
 Temporary (Please indicate dates available _____)
- Are you currently on "lay-off" status and subject to recall? Yes No
- Can travel if a job requires it? Yes No
- Have You Been Convicted Of A Felony Within The Last Five Years? Yes No



Education

	Name and Address of School	Course of Study	Number of Years Completed	Diploma Degree (Yes/ No)
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Describe any specialized training, apprenticeship, skills, and extra-curricular activities.

Describe any job related training in the United States Military.

Employment 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.

1.	Employer		Dates Employed		Dates Employed		Work /Duties Performed
			From	To			
	Address						
	Telephone Numbers				Hourly Rate/ Salary		
	Job Title		Supervisor		Starting	Final	
Reason for Leaving							
2.	Employer		Dates Employed		Dates Employed		Work /Duties Performed
			From	To			
	Address						
	Telephone Numbers				Hourly Rate/ Salary		
	Job Title		Supervisor		Starting	Final	
Reason for Leaving							
3.	Employer		Dates Employed		Dates Employed		Work /Duties Performed
			From	To			
	Address						
	Telephone Numbers				Hourly Rate/ Salary		
	Job Title		Supervisor		Starting	Final	
Reason for Leaving							
4.	Employer		Dates Employed		Dates Employed		Work /Duties Performed
			From	To			
	Address						
	Telephone Numbers				Hourly Rate/ Salary		
	Job Title		Supervisor		Starting	Final	
Reason for Leaving							

If you need additional space, please continue on a separate sheet of paper.

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 status.

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: DO NOT answer this question unless you have been informed about the requirements of the job for which you are applying.

Can you perform the essential functions of the job, for which you are applying, either with or without a reasonable accommodation? Yes No

References

1.	Name	Phone Number
	Address	
2.	Name	Phone Number
	Address	
3.	Name	Phone Number
	Address	

Applicant's Statement

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that 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 Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No

Remarks _____

Interviewer: _____

Date: _____

Employed Yes No

Date of Employment _____

Job Title _____

Hourly Rate/Salary _____ Department _____

By _____
NAME AND TITLE

DATE

FOR PERSONNEL DEPARTMENT USE ONLY

Position(s) Applied For is Open: Yes No

Positions (s) Consider For: _____

Date: _____

NAME: _____

POSITION: _____

DATE: _____