

# Application for Employment

The Company Is An Equal Opportunity Employer

All applicants for employment are required to complete and submit this Employment Application.

The Company does not discriminate on the basis of sex, age, color, race, religion, marital status, national origin, ancestry, sexual orientation, physical & mental disability, medical condition, genetic information, veteran status, or any other basis protected by federal, state or local law.

## Applicant Information

### LEGAL NAME

Last  First  Middle

HAVE YOU EVER WORKED UNDER ANOTHER NAME? ☐ YES ☐ NO

IF YES, UNDER WHAT NAME(S):

COMPLETE HOME ADDRESS include PO Box, Apt. #, etc.

Street  City  County  State  Zip Code

HOME PHONE  BUSINESS OR OTHER PHONE

E-MAIL ADDRESS

## Position Applying For

JOB TITLE/TYPE OF WORK  DESIRED SALARY  AVAILABLE START DATE

If necessary, are you available to work any of the following?

Overtime Holidays Work schedule other than M-F

☐ YES ☐ YES ☐ YES

☐ NO ☐ NO ☐ NO

HOW DID YOU LEARN ABOUT THIS OPENING?

DESIRED EMPLOYMENT: ☐ Full-Time ☐ Part-Time ☐ Temporary

HAVE YOU WORKED FOR OR APPLIED FOR A POSITION AT THE COMPANY BEFORE? ☐ YES ☐ NO

If yes, what position(s)?

DO YOU HAVE ANY RELATIVES WORKING HERE? ☐ YES ☐ NO If yes, who?:

IF HIRED, CAN YOU SUBMIT VERIFICATION OF YOUR LEGAL RIGHT TO WORK IN THE U.S.? ☐ YES ☐ NO

ARE YOU OVER 18 YEARS OF AGE? ☐ YES ☐ NO IF UNDER 18, DO YOU HAVE A WORK PERMIT? ☐ YES ☐ NO

## Education Begin with most recent college/university/technical school

NAME OF EDUCATIONAL INSTITUTION/LOCATION	MAJOR	NO. OF YEARS	GRADUATE	DIPLOMA/DEGREE
			<input type="checkbox"/> YES <input type="checkbox"/> NO	
			<input type="checkbox"/> YES <input type="checkbox"/> NO	
			<input type="checkbox"/> YES <input type="checkbox"/> NO	
ANY PROFESSIONAL DESIGNATIONS, TRAINING, PATENTS, PUBLICATIONS, COMPUTER SKILLS RELATED TO THE JOB SOUGHT:				