## Application For Employment

We consider applicants for gender, national origin, or any other legally protes	or all positions age, disability, rected status.	without regard narital or vet	d to race, co eran status,	lor, religio sexual ori	on, creed, entation,
	(PLEAS	SE PRINT)	<u>. u </u>	<u>-</u>	<del></del>
Position(s) Applied For			, <u> </u>	Date of Applic	ation
How Did You Learn About Us?				<del></del>	
☐ Advertisement	☐ Friend	□ Walk-In			
☐ Employment Agency	☐ Relative	Other			
Last Name	First Name	· .	Mid	dle Name	
Address Number Stre	set	City	8	State	.Zip Code
Telephone Number(s)			Social Secur	rity Number	
If you are under 18 years of proof of your eligibility to v	vork?		ed ·	□ Yes	□ No
Have you ever filed an apple	ication with us	before?		☐ Yes	$\square$ No
		If Y	es, give date	·	
Have you ever been employe	ed with us befor	re?		☐ Yes	□ No
		If Yo	es, give date		
Are you currently employed	?		, 8	☐ Yes	□ No
May we contact your presen	t employer?			☐ Yes	□ No
Are you prevented from law country because of Visa or I Proof of citizenship or immigration s	mmigration Sta	itus?	his	☐ Yes	□ No
On what date would you be	available for wo	ork?		· · · · · · · · · · · · · · · · · · ·	
Are you available to work:	☐ Full Time [	☐ Part Time	☐ Shift W	ork 🗆 Te	mporary
Are you currently on "lay-off	f" status and sul	bject to recall	? .	☐ Yes	□ No
Can you travel if a job requi	res it?			☐ Yes	□ No
Have you been convicted of Conviction will not necessarily disqual			ırs?	☐ Yes	□ No
f Yes, please explain	· · · · · · · · · · · · · · · · · · ·			<del>_</del> .	<del>-</del>

## **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.

Employer		_Dates E	imployed	
Address	. <u> </u>	From	To	Work Performed
Agaress				
Telephone Nun	nber(s)	Hourly R	ate/Salary	<u></u>
Job Title		Starting	Final	
JOD TIE	Supervisor			
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Employer	<u> </u>	Dates E	mployed	<u> </u>
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Job Title	Supervisor	Starting	Final	<u> </u>
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OO IME	Supervisor			
Reason for Leavin	g	<del></del> -	<del> -</del> -	·
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## **Education**

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## Applicant's Statement

I authorize investigation of all	
may be necessary in arriving at a	statements contained in this application for employment as an employment decision.
This application for employment 45 days. Any applicant wishing	t shall be considered active for a period of time not to exceed to be considered for employment beyond this time period not applications are being accepted at that time.
employment relationship with the the Employee may resign at any with or without cause. It is furt may not be changed by any written.	wledge that, unless otherwise defined by applicable law, any his organization is of an "at will" nature, which means that time and the Employer may discharge Employee at any time ther understood that this "at will" employment relationship ten document or by conduct unless such change is specifically authorized executive of this organization.
	inderstand that false or misleading information given in my result in discharge. I understand, also, that I am required to s of the employer.
Signature of App	plicaut Date
	<del>-</del> -
FOR PERS	ONNEL DEPARTMENT USE ONLY
	·
Arrange Interview 🗌 Yes	□ No
Remarks	□ No
<u>-</u>	
Remarks	ÎNTERVIEWER DÂTE
Remarks	Date of Employment
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