

Are you available to work : () Full time () Part time () Shift work () Temporary () Over time

Are you on a lay-off and subject to recall? () yes () no

Can you travel if the job requires it? () yes () no

Certifications/Certificates

Please list any certifications you may hold:

Professional References

Please list the name, telephone number, relationship and organization of three professional references:

1. _____

2. _____

3. _____

Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment or other experience:

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include military service assignments and any verified work performed on a volunteer basis. You may exclude organization names which indicate race, creed, color, religion, sex, sexual orientation, marital status, status as a veteran, Vietnam Era Veteran, or being a member of the Reserves or National Guard.

Employer _____ Phone _____
Street _____
City, State, Zip _____
Job Title _____ Supervisor _____
Work Performed _____

Reason for leaving _____
Dates Employed - Starting _____ Final _____

Employer _____ Phone _____
Street _____
City, State, Zip _____
Job Title _____ Supervisor _____
Work Performed _____

Reason for leaving _____
Dates Employed - Starting _____ Final _____

Employer _____ Phone _____
Street _____
City, State, Zip _____
Job Title _____ Supervisor _____
Work Performed _____

Reason for leaving _____
Dates Employed - Starting _____ Final _____

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

EDUCATION

	High School	College/University	Graduate/Professional
Name of School			
Years Completed <i>please circle</i>	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree			
Course of Study			

Honors received:

Describe Specialized Training, Apprenticeship, Skills, and Extra-Curricular Activities:

It is my understanding that this employment application, or the granting of an oral interview, does not represent a contract of employment or a promise of future benefits by this company/organization. **I understand and agree that if hired, my employment will be at-will in nature and may be terminated, with or without cause, at any time, by either myself or my employer. I also understand that this written statement supersedes any and all oral representations made by agents or representatives of this company/organization.**

AGREEMENT: I Certify that the information on this application is true, complete and correct. I hereby authorize the investigation of my past employment, education and activities and I release from all liability all persons, companies and corporations supplying such information. I understand that false answers, statements or significant omissions made by me on this form shall be sufficient cause for denial of employment or discharge.

Signature of Applicant

Date

For Human Resource Department Only

Arrange Interview () yes () no

Interviewer

date

Employed () yes () no

Date of Employment _____

Job Title _____ Hourly Rate/Salary _____ Department _____