



Application for Employment

Form Ref # FF01

Mouse over the field to get help/tips on filling the field. Use mouse or "Tab" & "Shift-Tab" to switch between fields.

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Date	
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First name		Middle name		Last name	
Street Address					
City		State		ZIP	
Telephone			Email Id		

Position applied for		
How did you hear of this opening?		
When can you start?		
Desired Wage \$		
Are you looking for full-time employment?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If no, what hours are you available?		
Are you willing to work swing shift?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you willing to work graveyard?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been convicted of a felony? (This will not necessarily affect your application.)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please describe conditions.		



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Education

	School Name	Location	Year	Major	Degree
High School					
College					
College					
Post-College					
Other Training					
In addition to your work history, are there other skills, qualifications, or experience that we should consider?					

Employment History (Start with most recent employer)

Company Name					
Address					
Telephone					
Date Started		Starting Wage		Starting Position	
Date Ended		Ending Wage		Ending Position	
Name of Supervisor					
May we contact?		Yes <input type="checkbox"/>		No <input type="checkbox"/>	
Responsibilities					
Reason for leaving					



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Company Name					
Address					
Telephone					
Date Started		Starting Wage		Starting Position	
Date Ended		Ending Wage		Ending Position	
Name of Supervisor					
May we contact?		Yes <input type="checkbox"/>		No <input type="checkbox"/>	
Responsibilities					
Reason for leaving					

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Responsibilities					
Reason for leaving					

Attach additional information if necessary.

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or executive of this company, other than the president, has any authority to alter the foregoing.

Signature

Date

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