JOB APPLICATION

***PLEASE NOTE: It is important that you complete all parts of the application. If your application is incomplete or does not clearly show the experience and/or training required, your application may not be accepted. If you have no information to enter in a section, please write N/A.***

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  | **Name and Address** | | | |  |  |  |
| Name (First, MI, Last) | |  |  |  |  | Social Security Number | | |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| Mailing Address | |  |  |  |  |  |  |  |  |  |
|  | |  |  |  |  |  |  |  |  |  |
| City, State, and Zip Code | |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  | |  |  |
| Telephone | |  |  |  |  | Alternate Phone | | |  |  |
|  | |  |  |  |  |  | |  |  |  |
| If under 18, please list age | |  |  |  |  | Email | |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | **Job** | **Type** | |  |  |  |
|  |  |  | **Days/hours available to work** | | | | |  |  |  |
|  I have no |  Mon. |  Tues. |  |  Wed. |  |  Thurs. |  |  Fri. |  Sat. |  Sun. |
| preference. |  |  |  |  |  |  |  |  |  |  |
|  |  |  | |  |  |  |  | |  |  |
| I am seeking a: | |  Full‐time job | | |  |  Part‐time job | | |  Full‐ or Part‐time | |
| How many hours can you work weekly? | | | | |  | Can you work nights? | | | Date available to begin | |
|  |  |  |  |  | |  |  |  |  |  |
|  |  |  |  | **Additional** | | **Information** | |  |  |  |
| Have you ever been employed by this organization in the past? | | | | | | | |  |  Yes |  No |
| I certify that I am a U.S. citizen, permanent resident, or a foreign national with | | | | | | | | |  Yes |  No |
| authorization to work in the United States. | | | | |  |  |  |  |  |  |
|  | | | | | | | | |  |  |
| Have you ever been convicted of, or entered a plea of guilty, no contest, or had a | | | | | | | | |  Yes |  No |
| withheld judgment to a felony? | | |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| If Yes, please explain: | |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  | |  | |
| Do you have a driverʹs license?  Yes | | |  |  No |  | Driverʹs license number | | | Issued in what state? | |
|  |  |  | |  | |  |  |  |  |  |
| Have you had any accidents during the past three years? | | | | | | | |  | How many? |  |
|  | | | | | | | |  |  |  |
| Have you had any moving violations during the past three years? | | | | | | | |  | How many? |  |
|  |  |  |  |  |  |  |  |  |  |  |

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**Education**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | School |  | Location (mailing address) | Years | Major | Degree or |  |  |
|  |  | Completed | Diploma |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  | **High School** |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  | **College or Business/Trade** | **School** |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

**Military**

|  |  |  |  |
| --- | --- | --- | --- |
| Have you even been in the Armed Forces? |  Yes |  No | Date entered |
|  |  |  |  |
| Are you now a member of the National Guard? |  Yes |  No | Discharge date |
|  |  |  |  |
| Specialty |  |  |  |

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**Work Experience**

***Please list ALL work experience beginning with your most recent job held. Attach additional sheets if necessary.***

|  |  |  |  |
| --- | --- | --- | --- |
| Company | Name of last supervisor |  | Hrs/week |
|  |  |  |  |
| Address | Start Date | Starting Salary | |
|  |  |  | |
| City, State, and Zip Code | End Date | Final Salary | |
|  |  |  |  |
| Phone number | Your last job title |  |  |
|  |  |  |  |
| Reason for leaving (be specific) |  |  |  |

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| May we contact this employer? |  Yes |  No | |  |  |
| Company |  |  | Name of last supervisor |  | Hrs/week |
|  |  |  |  |  |  |
| Address |  |  | Start Date | Starting Salary | |
|  |  |  |  |  | |
| City, State, and Zip Code |  |  | End Date | Final Salary | |
|  |  |  |  |  |  |
| Phone number |  |  | Your last job title |  |  |
|  |  |  |  |  |  |
| Reason for leaving (be specific) |  |  |  |  |  |

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

May we contact this employer?  Yes  No

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**Work Experience (continued)**

|  |  |  |  |
| --- | --- | --- | --- |
| Company | Name of last supervisor |  | Hrs/week |
|  |  |  |  |
| Address | Start Date | Starting Salary | |
|  |  |  | |
| City, State, and Zip Code | End Date | Final Salary | |
|  |  |  |  |
| Phone number | Your last job title |  |  |
|  |  |  |  |

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

May we contact this employer?  Yes  No

**References**

*Please include name, phone number, and circumstances of your acquaintance. Exclude relatives and former employers.*

1.

2.

3.

4.

***I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that, should this application contain any false or misleading information, my application may be rejected or my employment with this company terminated.***

|  |  |
| --- | --- |
| Signature | Date |
|  |  |

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