APPLICATIONFOR EMPLOYMENT

(PLEASE PRINT)

NAME:LAST				E: <u>///</u>
		IRST	MIDDLE	
ADDRESS:STRE	EET C	CITY	STATE	ZIP
PHONE: (home)	(cell)		_EMAIL:	
POSITION(S) APPLI	ED FOR:			
If you are under 18 y	years of age, can you provid	e a work permit?	YES NO	
Have you ever filed	an application with us before	e? YES	NO If YES, give dates_	
Have you worked fo	r us before? YES	_ NO If YES, give	dates	
Are you currently en	nployed? YES N	IO May we contact	our present employer? _	YES NO
Do you have the leg will be required upon	al right to work in this countr	y? YES	NO Proof of citizenship	p or immigration status
When would you be	available for work?/	/		
Can you work	Full Time Part time	Shift Work	Temporary On	ı-Call?
Can you travel if a jo	ob requires it? YES _	NO		
EDUCATION	and TRAINING			
	and TRAINING			
Education	Name of School	City/State	#of Years	Degrees
High School				
College				
Graduate Work				
Other Schools				
Major Studies				
Honors and/or Accor	nplishments			
FOR OFFICE USE O				
ACTION TAKEN:	Pre-screened / not qu Interviewed / no offer		position available erviewed / offer accepted	
	Applicant withdrew		rviewed / offer declined	

EMPLOYMENT HISTORY

Start with your MOST CURRENT JOB. Include any job-related military assignments or volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status.

1. EMPLOYER	DATES EMPLOYED FROM//_TO/
ADDRESS	PHONE (
JOB TITLE UPON HIRE	TITLE WHEN YOU LEFT
SUPERVISOR	REASON FOR LEAVING
DESCRIPTION OF DUTIES	
2. EMPLOYED	DATES EMPLOYED EDOM
	DATES EMPLOYED FROM / / TO / /
	PHONE ()
	TITLE WHEN YOU LEFT
	REASON FOR LEAVING
DESCRIPTION OF DUTIES	
3. EMPLOYER	DATES EMPLOYED FROM//TO//
ADDRESS	PHONE ()
JOB TITLE UPON HIRE	TITLE WHEN YOU LEFT
SUPERVISOR	REASON FOR LEAVING
DESCRIPTION OF DUTIES	
4. EMPLOYER	DATES EMPLOYED FROM//_TO/
ADDRESS	PHONE ()
JOB TITLE UPON HIRE	TITLE WHEN YOU LEFT
SUPERVISOR	REASON FOR LEAVING
DESCRIPTION OF DUTIES	

	SE INDICATE WHETHER YOU WERE EVER EMPL ER A NAME OTHER THAN THAT USED ON THIS AF		YESNO
IF YE	S, PLEASE SPECIFY NAME(S):		
	OU HAVE ANY RELATIVES CURRENTLY EMPLOYI S, PLEASE LIST NAME(S) AND DEPARTMENT(S) V		YESNO
	MARIZE ANY SPECIAL SKILLS AND QUALIFICATIC ERIENCES THAT MAY QUALIFY YOU TO WORK IN		
	ANY JOB-RELATED LICENSES, CERTIFICATES, erm the functions of the position.)	tc. (Please include driver's	s license <i>only</i> if required to
DESC	CRIBE ANY SPECIAL ACCOMPLISHMENTS, PUBLIC	CATIONS, AWARDS, etc.	
ADD	ANY ADDITIONAL INFORMATION YOU WOULD LIK	Œ US TO CONSIDER.	
	FERENCES		
super	te give the names and telephone numbers of three k rvisors or managers, coworkers, clients, or others who led to or professional references who are not related to yo	know your job performance	
1.	NAME	PHONE ()	
	POSITION		
2.	NAME	PHONE ()	
	POSITION	COMPANY	
3.	NAME	PHONE ()	
	POSITION		

APPLICANT'S STATEMENT

I certify that the information in the application form is true and correct to the best of my knowledge, and I agree to have any of the statements checked by the Company unless I have indicated otherwise. I authorize the references listed above, as well as all other individuals the Company contacts, to provide any and all information concerning my previous employment and any other pertinent information they may have of a business nature. Further, I release all parties from any and all liability for any damages that may result from furnishing such information to the Company, as well as from the use or disclosure of such information by the Company or any of its agents, employees, or representatives.

I understand that no questions will be asked concerning my salary history, ethnicity, gender preferences, or past convictions. It is the intent of the Company to confirm job-related information that will aid the Company in determining if you are the best candidate for the position.

I understand that any misrepresentation or omission by me in this application or any other form that I prepare or sign, may result in my failure to receive an offer of employment, or if I have been hired, in my dismissal from employment.

In consideration of my employment, I agree to conform to the rules and standards of the Company as amended by the Company from time to time at its discretion. I understand that as a condition of initial and continued employment, the Company's dispute resolution procedure will be the recognized means of settling employment-related claims.

Employment with the Company is on an "at-will" basis and may be terminated by either the employee or the Company at any time with or without cause or notice. No commitment or other term of employment shall be inferred or otherwise assumed from any source whatsoever, written or oral. Employment for any specified duration shall not be valid or binding on the employee or Company unless it is expressly set forth in a written document and signed by the employee and by the President of the Company. Employment-at-will is a term and condition of employment and continued employment for all persons employed by the Company.

I also understand that all offers of employment are conditioned on the Company's receipt of satisfactory responses to reference requests, background clearance as required for specific positions, and the provision of satisfactory proof of an applicant's identity and legal authority to work in the United States.

SIGNATURE OF APPLICANT	DATE	

AN EQUAL OPPORTUNITY EMPLOYER

All applicants will be considered for employment without regard to race, religion, color, sex, national origin, age, marital or veteran status, sexual orientation, medical condition or disability, or any other status protected by applicable state or federal civil rights laws.