

Education/Employment

List Name and Address of Schools	Number of Years Completed	Diploma/Degree/Certificate	Subjects Studied
High School/GED:			
College/University:			
Vocational/Technical:			
What skills do you have that relate to the job for which you are applying?			
What machines or equipment can you operate that relate to the job for which you are applying?			
Have you worked or attended school under any other names: <i>If Yes, list name(s):</i>		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you presently employed? <i>If Yes, whom do you suggest we contact?</i>		<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been fired from a job or asked to resign? <i>If Yes, please explain:</i>		<input type="checkbox"/> Yes	<input type="checkbox"/> No

Previous Employment

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references. Note: A job offer may be contingent upon acceptable references from current and former employers.

Employer:		Job Title/Duties	
Address:		Dates of Employment (MM/YY):	From: To:
City, State, Zip		Pay: Start \$	Final: \$
Supervisor:	Phone:	Reason for Leaving:	
Employer:		Job Title/Duties	
Address:		Dates of Employment (MM/YY):	From: To:
City, State, Zip		Pay: Start \$	Final: \$
Supervisor:	Phone:	Reason for Leaving:	
Employer:		Job Title/Duties	
Address:		Dates of Employment (MM/YY):	From: To:
City, State, Zip		Pay: Start \$	Final: \$
Supervisor:	Phone:	Reason for Leaving:	
Employer:		Job Title/Duties	
Address:		Dates of Employment (MM/YY):	From: To:
City, State, Zip		Pay: Start \$	Final: \$
Supervisor:	Phone:	Reason for Leaving:	
Employer:		Job Title/Duties	
Address:		Dates of Employment (MM/YY):	From: To:
City, State, Zip		Pay: Start \$	Final: \$
Supervisor:	Phone:	Reason for Leaving:	

References

Please provide three references.

Name	Telephone #	E-Mail Address	Business/Relationship
Name	Telephone #	E-Mail Address	Business/Relationship
Name	Telephone #	E-Mail Address	Business/Relationship

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

- I certify that all information provided in this employment application is true and complete. *I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.* I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.
- I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre-and/or post-employment drug screen as a condition of employment, if required. I understand that, if I am extended an offer of employment, it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.
- I understand that this application, verbal statements by management, or subsequent employment does not create an express or implied contract of employment nor guarantee employment for any definite period of time. Only the president of the organization has the authority to enter into an agreement of employment for any specified period and such agreement must be in writing, signed by the president and the employee. If employed, I understand that I have been hired at the will of the employer and my employment may be terminated at any time, with or without reason or with or without notice.

I have read, understand, and by my signature consent to these statements.

Signature:

Date:

(This application for employment will remain active for a limited time. Ask the organization's representative for details.)