

APPLICATION FOR EMPLOYMENT

NOTICE TO APPLICANTS AND EMPLOYEES

Screening tests for illegal drug use may be required before hiring and during your employment here.

Equal access to programs, service and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

PERSONAL DATA

Name _____ Social Security # _____

Address _____

Street

City

State

Zip Code

Home Phone (____) _____ Cell(____) _____ Message(____) _____

Position(s) applying for _____ Date _____

Have you ever submitted an application here before? ___ Yes ___ No

If yes, give date(s) and position(s) _____

Have you ever been employed here before? ___ Yes ___ No

If yes, give date(s) From ___/___/___ to ___/___/___

Date available for work ___/___/___

Will you work overtime if required? ___ Yes ___ No

If no, please explain _____

Driver's License: ___ Operator ___ CDL - CDL Type _____ Endorsements _____

Answering "yes" to the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever pled "guilty" or "no contest" to or been convicted of a Felony? ___ Yes ___ No

If yes, please provide date(s) and details _____

EDUCATION

High School Diploma or GED? ___ Yes ___ No Post-Secondary Degree? _____

Name of school beyond High School _____

Training Length _____ Date Complete ___/___/___

Major _____ Minor _____

Apprenticeship Level _____ In which trade? _____

Explain any gaps in your employment, other than those due to personal illness, injury or disability. _____

ADDITIONAL INFORMATION THAT COULD HELP YOU QUALIFY FOR THIS POSITION

Examples include: classes (include dates), certificates, current licenses, specific equipment and other skills.

REFERENCE (Preferably persons who know about your work/training)

Name	Address	Phone Number
1.)	_____	_____
2.)	_____	_____
3.)	_____	_____

The information that you provide on this application is subject to verification. Falsifications or misrepresentations may disqualify you from consideration for employment or, if hired, may be grounds for termination at a later date. Do you want to be informed before we contact your present employer?

___ Yes ___ No

With my signature below (typed or written), I certify that all information on this and all attached pages is true, correct and complete to the best of my knowledge and contains no willful falsifications or misrepresentations. I authorize all former employers to release job-related information they may have about me and I release all persons or companies from any liability or responsibility for providing such information.

SIGNATURE _____ **DATE** _____