## APPLICATION FOR EMPLOYMENT

All applicants are considered for all positions without regard to race, religion, color, sex, gender, sexual orientation, pregnancy, age, national origin, ancestry, physical or mental disability, medical condition, military or veteran status, genetic information, marital status, ethnicity, citizenship or immigration status or any other protected classification, in accordance with applicable federal, state, and local laws. By completing this application, you are seeking to join a team of hardworking professionals dedicated to consistently delivering outstanding service to our customers and contributing to the financial success of the organization, its clients, and its employees. Equal access to programs, services, and employment is available to all qualified persons. Those applicants requiring accommodation to complete the application and/or interview process should contact a management representative. Please print.

Position(s) Applied for	Date of Application			
Print Name (Last, First, & Midd	lle)			
Street Address		City	State	ZIP Code
Main Phone Number	Alternate Phone Number	Email		

## **EMPLOYMENT EXPERIENCE**

List the names of your present or previous employers in chronological order with present or most recent employer listed first. Be sure to account for all periods of time. If self-employed, give firm name and supply business references. Add additional page if necessary.

Name of Employer	Supervisor	May we contact?			
		Yes No			
Street Address					
Phone Number	Dates Employed (Month/Year)				
	From	То			
Job Title and Duties	Reason for Leaving				
Name of Employer	Supervisor	May we contact?			
		Yes No			
Street Address					
Phone Number	Dates Employed (Month/Year)				
	From	То			

Job Title and Duties	Reason for Leaving				
Name of Employer	Supervisor	May we contact?			
		Yes No			
Street Address					
Phone Number	Dates Employed (Month/Year)				
	From	То			
Job Title and Duties	Reason for Leaving				
Have you ever been involuntarily terminated or asked to res	ign from any job?	□ Yes □ No			
lf yes, explain:					
Explain any gaps in your employment history:					

you well:	lationship	<b>not</b> related to yo		Phone Numbe	
ences of individu		<b>not</b> related to yo	ou:	Phone Numbe	er or Email
ences of individu		<b>not</b> related to yo	ou:	Phone Numbe	er or Email
ences of individu		<b>not</b> related to yo	ou:	Phone Numbe	er or Email
ences of individu		<b>not</b> related to yo	ou:		
16		Degree Yes/No	Area of Study/Major		Specialized Training, Skills, or Extra- Curricular Activities
ackground in the	e table provid				Consisting d Tunining
	ne Ye	Voars	ne Completed Degree	Years Diploma/ Degree Area of	Years Diploma/ Degree Area of Study/Major

	AL INFORMATION		· namo?				Yes	No
1.								_
2.	•							-
		•					Yes	No
	If yes to eit	her of the abo	ve, provide the	e additional in	formation:			
3.	Have you ev	er worked for th	nis company bef	ore?			Yes	No
	If yes, give	dates and posi	tion:				_	
4.		e are you availa						
5.	Are you availa	ble to work?	Full-time	Part-time	Shift Work	Temporary		
6.	Days and ho	urs, you are ava	ilable to work:					
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	
7.	If hired, wou	ıld you have a re	eliable means of	transportation	n to and from	work?	Yes	No
8.	Can you trav	el if the position	n requires it?				Yes	No
9.	Can you relo	cate if the posit	ion requires it?				Yes	No
10	. Are you at le	east 18 years old	l?				Yes	No
	Note: If und	der 18, hire is s	ubject to verif	ication that yo	ou are of min	imum legal age.		
11	. If hired, can	you present evid	dence of your id	entity and lega	l right to worl	in this country?	Yes	No
12	. Are you able	to perform the	essential job fu	nctions of the j	ob for which y	ou are applying w	vith or witho	out
	reasonable a	accommodation	?				Yes	No
	Note: We c	omply with the	ADA and con	sider reasonal	nle accommo	dation measure	s that may	he

necessary for qualified applicants/employees to perform essential job functions.

## Read and initial each paragraph below. If there is anything that you do not understand, please ask. I hereby authorize the Company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the prior employers and references I have listed to disclose to the Company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure. If I am employed by the Company, I understand that I am required to comply with all rules and regulations of the Company. \_\_\_\_ If hired, I understand and agree that my employment with the Company is at-will, and that neither I, nor the Company is required to continue the employment relationship for any specific term. I further understand that the Company or I may terminate the employment relationship at any time, with or without cause, and with or without notice. I understand that the at-will status of my employment cannot be amended, modified, or altered in any way by any oral modifications. I understand that safety of employees is extremely important to the Company and that the Company is committed to ensuring a safe working environment. I understand that I, and every employee, have a responsibility to prevent accidents and injuries by observing all safety procedures and guidelines and following the directions of my site supervisor. I understand and agree to comply with federal, state, and local regulations related to on-the-job safety and health. I hereby certify that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery. \_ I understand that if I am selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 Form in this regard. I understand that if any term, provision, or portion of this Agreement is declared void or unenforceable, it shall be severed and the remainder of this Agreement shall be enforceable. MY SIGNATURE INDICATES THAT I HAVE READ, UNDERSTAND, AND AGREED TO ALL OF THE ABOVE TERMS.

Name (print): \_\_\_\_\_\_ Date:

**APPLICANT STATEMENT AND AGREEMENT** 

Signature: \_\_\_