

APPLICATION FOR EMPLOYMENT

 LAST NAME FIRST NAME MIDDLE INITIAL (_____) TELEPHONE NUMBER

 STREET ADDRESS CITY STATE ZIP CODE

PERSONAL INFORMATION

1. Are you 18 years of age or older? Yes No Social Security Number _____

2. Are you either a U.S. Citizen or an Alien Authorized to work in the U.S.? Yes No

3. Have you ever been convicted of a Felony? Yes No

3a. If YES, please explain (a YES answer does not necessarily mean that employment will be denied). _____

4. Can you perform the essential functions of the job with or without reasonable accomodation? Yes No

5. If this job requires you to travel, are you able to do so? Yes No

EMPLOYMENT DESIRED

POSITION	DATE YOU CAN START	SALARY OR HOURLY RATE DESIRED
1. Are you willing to work evenings?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Are you willing to work weekends?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Are you willing to work holidays?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4. Would you like to work	<input type="checkbox"/> Full Time OR <input type="checkbox"/> Part Time	
5. Do you have any special licensing or certification?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5a. If YES, please explain: _____		

EDUCATION OR TRAINING

NAME OF SCHOOL	COURSE OF STUDY	YEARS COMPLETED	DID YOU GRADUATE?
HIGH SCHOOL			
COLLEGE			

OTHER (Include apprenticeships and specialized training) _____

