

Employment Application

Date _____

- ✓ Please complete this application by typing or printing in ink. **INCOMPLETE** or **UNSIGNED** applications will not be considered.
- ✓ We are an equal opportunity employer. We do not discriminate on the basis of race, religion, color, sex, age, national origin, marital status, or disability.
- ✓ Are you able to perform the essential functions of the position with or without accommodations? Yes No

PERSONAL DATA

Name _____
Present Address _____ City _____ State _____ Zip _____
Day Phone () - _____ Evening Phone () - _____ E-Mail _____
Are you 18 years or older? Yes No Position Applied For: _____ Desired Salary _____/hr

MILITARY SERVICE

Have you served in the US Military? Yes No

If Yes, Duty/Specialized Training: _____

EDUCATION

| Institution | City/State | Did you Graduate? | Years Left to Graduate? | Year of Graduation? | Field of Study |
|--------------|------------|--|-------------------------|---------------------|----------------|
| High School | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| GED | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| Other School | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| College | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |
| College | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | |

WORK EXPERIENCE (List most recent work experience first)

Company Name _____ Immediate Supervisor _____

Complete Address _____
Street / P.O. Box City State Zip Code

Job Title _____ Phone () - _____ May We Contact This Employer? Yes No

Job Description (duties, skills, equipment used)

Dates: From (mm/yy) ____ / ____ To (mm/yy) ____ / ____ Reason for leaving _____

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