

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status

Employment Application

An Equal Opportunity Employer

| | | | | | | | | | | | | | | | | _ |
|---|------------|------------------------|--------|---------------------------------------|--------|--------------|--------------|----------|------------------|----------------|------|-----|------|---|------|---|
| APPLICANT INFORMATION | J | (PLEAS | SE PRI | NT) | | | | | | | | | | | | |
| Last Name | | | | First | | | | M.I. | Ove 18 1 | | YES | | NO [| | | |
| Street Address | | | | | | | | | Apartment/Unit # | | | | | | | |
| City | | | | State | | | | | | ZIP | | | | | | |
| Phone | | | | E-mail Address | | | | | | | | | | | | |
| Date Available Social | | | | curity No. | | | | | Des | Desired Salary | | | | | | |
| Position Applied for Full Time | | | | Part Time How Did You Learn About Us? | | | | | | | | | | | | |
| Are you a citizen of the United Sta | ites? | YES 🗌 | NO | | If no, | are y | ou au | uthorize | d to w | ork in the U | .S.? | YES | S 🗌 | 1 | NO [| |
| Have you ever applied for work, or worked for this company? | | | | NO If so, when? | | | | | | | | | | | | |
| Have you ever been convicted of a | NO | If yes, when & explain | | | | | | | | | | | | | | |
| | | | | | • | | | | | | | | | | | |
| EDUCATION | | | | | | | | | | | | | | | | |
| High School | | | Addr | ess | | | | | | | | | | | | |
| | Did you gr | raduate? | YES | | NO [| | City, | ST | | | | | | | | |
| College | | | Addr | ess | | | | | | | | | | | | |
| From To | Did you gr | raduate? | YES | | NO [| | Degr | ee | | | | | | | | |
| Other | | | | Address | | | | | | | | | | | | |
| From To | Did you gr | raduate? | YES | | NO [| | Degr | ee | | | | | | | | |
| DEFEDENCES | | | | | | | | | | | | | | | | |
| REFERENCES Please list three professional refer | rences | | | | | | | | | | | | | | | |
| Full Name | | | | | | | Relationship | | | | | | | | | |
| Company | | | | | | Phone () | | | | | | | | | | |
| Address | | | | | | | | | | | | | | | | |
| Full Name | | | | | | Relationship | | | | | | | | | | |
| Company | | | | | | Phone () | | | | | | | | | | |
| Address | | | | | | | | | | | | | | | | |
| Full Name | | Relationship | | | | | | | | | | | | | | |
| Company | | | | Phone () | | | | | | | | | | | | |
| Address | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | |

| PREVIOUS EM | PLOYMENT | | | | | | | | | | |
|---|---------------------|------------------------|-----------|-------------------|---------------|---------------|----|--|--|--|--|
| Company | | | Phone | (|) | | | | | | |
| Address | | | | | Supervisor | | | | | | |
| Job Title Starting Salary | | | | | | Ending Salary | \$ | | | | |
| Responsibilities | | | | | | | | | | | |
| From | То | Reason for Leaving | | | | | | | | | |
| May we contact yo | our previous superv | visor for a reference? | NO 🗌 | | | | | | | | |
| Company | | | | | () | | | | | | |
| Address | | | | | Supervisor | | | | | | |
| Job Title Starting Salary | | | | | | Ending Salary | \$ | | | | |
| Responsibilities | | | | | | | | | | | |
| From | То | Reason for Leaving | | | | | | | | | |
| May we contact yo | our previous superv | visor for a reference? | NO 🗆 | | | | | | | | |
| Company | | | Phone () | | | | | | | | |
| Address | | | | | Supervisor | | | | | | |
| Job Title | | | \$ | | Ending Salary | \$ | | | | | |
| Responsibilities | | | | | | | | | | | |
| From | То | Reason for Leaving | | | | | | | | | |
| May we contact your previous supervisor for a reference? YES NO | | | | | | | | | | | |
| MILITARY SER | WICE | | | | | | | | | | |
| Branch | RVICE | | | From | То | | | | | | |
| Rank at Discharge | <u> </u> | | | Type of Discharge | | | | | | | |
| If other than hono | | | | 1777 | | | | | | | |
| Sales aller notification oxplain | | | | | | | | | | | |
| ADDITIONAL INFORMATION – List specialized training, apprenticeships, skills, or abilities, or any other information you may feel would be helpful to us in considering your application. | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| DISCLAIMER A | AND SIGNATUR | RE | | | | | | | | | |
| I certify that my answers are true and complete to the best of my knowledge. | | | | | | | | | | | |
| If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. | | | | | | | | | | | |
| Signature | | | | Date | | | | | | | |
| | | | | | | | | | | | |