

Position(s) Applied For





Date of Application

APPLICATION FOR EMPLOYMENT

Fill out form completely

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

** TO ENSURE FULL CONSIDERATION, YOU MUST FILL OUT THE APPLICATION COMPLETELY. **

(PLEASE PRINT)

How Did You Learn About Us? [] Advertisement [] Friend	[] Relative	[] Inquiry	[] Drive-by	[] Other		
Last Name		First Name		N	Iiddle Name	
Address Number	Street	City	State		Zip Code	
Telephone Number(s)	Day	Evening			Social Security Number	
	PLEASE FILL O	UT COMPLETEL	Y / CHECK	EVERY B	OX!	
Best time to contact you at home	is:				:	_ am / pm
If you are under 18 years of age, can you provide required proof of your eligibility to work?						[] No
What choice best reflects your int	take of alcohol. [] never	[] occasionally [] n	oderately [] frequ	iently		
Do you take any illicit drugs?	Yes [] No Woo	uld you be willing to submit	o a drug test? [] Yes	[] No		
Have you ever applied with us be	fore? If yes, give date	·			[] Yes	[] No
Do any of your friends or relatives work here? If Yes, state name & relationship					[] Yes	[] No
Are you currently employed?					[] Yes	[] No
May we contact your present employer?						[] No
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Proof of citizenship or immigration status will be required upon employment.					[] Yes	[] No
Date available for work	// What is y	our desired salary range?				
Ž	[] Full Time [] Part Time (please indicate [] Temporary (please indicate d	Mornings After lates available	noon Evenin	ngs) /		
Are you currently on "lay-off" status and subject to recall?						

EDUCATION

School	Name & Address of School	Course of Study	Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate/ Professional				
Other (Specify)				
WORK EXPER	RIENCE			
Start with your preser religion, gender, nation	nt or last job. Include any job-related military se onal origin, disabilities or other protected status.	ervice assignments and volunteer activities. You	may exclude organizations which	ch indicate race, color,
Employer		Dates Employed From To	Work Performe	d
Address				
Telephone Number(s))			
Starting/Present Job 7	Title	Hourly Rate / Salary Starting Final		
Supervisor				
Reason for Leaving		May We Contact?	[] Yes [] No	
Employer		Dates Employed From To	Work Performe	d
Employer Address			Work Performe	d
)	From To	Work Performe	d
Address		From To	Work Performe	d
Address Telephone Number(s)		From To	Work Performe	d
Address Telephone Number(s) Starting/Present Job 7		From To	Work Performe	d
Address Telephone Number(s) Starting/Present Job Tolephone Supervisor		From To [][] Hourly Rate / Salary Starting Final		d
Address Telephone Number(s) Starting/Present Job Tolephone Supervisor		From To [][] Hourly Rate / Salary Starting Final		
Address Telephone Number(s) Starting/Present Job 7 Supervisor Reason for Leaving		From To [][] Hourly Rate / Salary Starting Final May We Contact? Dates Employed	[]Yes []No	
Address Telephone Number(s) Starting/Present Job To Supervisor Reason for Leaving Employer	Title	From To [][] Hourly Rate / Salary Starting Final May We Contact? Dates Employed From To	[]Yes []No	
Address Telephone Number(s) Starting/Present Job To Supervisor Reason for Leaving Employer Address	Title	From To [][] Hourly Rate / Salary Starting Final May We Contact? Dates Employed From To	[]Yes []No	
Address Telephone Number(s) Starting/Present Job 7 Supervisor Reason for Leaving Employer Address Telephone Number(s)	Title	From To [][] Hourly Rate / Salary Starting Final [] [] May We Contact? Dates Employed From To [][] Hourly Rate / Salary	[]Yes []No	

Comments: Include explanation	of any gaps in employment.							
Describe any specialized training, ap	prenticeship, skills and extra-curricu	ılar activities.						
beseries any specialized training, up	pronticesmp, sams und caera currie	and welly lifes.						
Additional Information								
Auditional Information								
Other Qualifications Summarize special job-rea	 lated skills and avalifications acquired from em	ployment or other experience						
Gener Quantications Summarize special job ven	area shiris ana quarifications acquireas for emp	proyment or other experience.						
Specialized Skills								
Specianzeu Skins								
MULTIPLE PHONE LINES	LOTS OF EXPERIENCE	LITTLE EXPERIENCE						
CUSTOMER SERVICE	LOTS OF EXPERIENCE	LITTLE EXPERIENCE						
FILING	LOTS OF EXPERIENCE	LITTLE EXPERIENCE						
KEYBOARDING	LOTS OF EXPERIENCE	LITTLE EXPERIENCE						
FAX MACHINE	LOTS OF EXPERIENCE	LITTLE EXPERIENCE						
QUICKBOOKS	LOTS OF EXPERIENCE	LITTLE EXPERIENCE						
MICROSOFT WORKS / WORD	LOTS OF EXPERIENCE	LITTLE EXPERIENCE						
MICROSOFT EXCEL MITCHELL MANAGER+ SOFTWARE	LOTS OF EXPERIENCE LOTS OF EXPERIENCE	LITTLE EXPERIENCE LITTLE EXPERIENCE						
ESTIMATING, MECHANICAL	LOTS OF EXPERIENCE	LITTLE EXPERIENCE LITTLE EXPERIENCE						
ESTIMATING, BODY	LOTS OF EXPERIENCE	LITTLE EXPERIENCE						
,								
Personal / Professional References (D	o not include family members or past supervis	ors.)						
Name	Phone Number	Best Time to Call	Occupation					
1)								
2)								
2)								
3)								
APPLICANT'S STATEMENT								
I certify that answers given herein are true and co	omplete.							
I authorize investigation of all statements contain	ied in this application for employment as may be	e necessary in arriving at an employment	decision.					
This application for employment shall be consid	ered active for a period of time not to exceed 45	days Any applicant wishing to be consi	dered for employment beyond this time					
period should inquire as to whether or not applic		days. They applicant wishing to be consi	dered for employment beyond this time					
I hereby understand and acknowledge that, unless								
that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this								
organization.	locument or by conduct unless such change is sp	pecifically acknowledged in writing by ai	authorized executive of this					
organization.								
In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am								
required to abide by all rules and regulations of the employer.								
Signature of Ameliane								
Signature of Applicant		Da	le .					