

Employment Application

APPLICATION FOR EMPLOYMENT

[Company name], An Equal Opportunity Employer. If applicable to Company, reasonable accommodation under the Americans with Disabilities Act will be provided as required by law.

Last Name First Name Social Security
Middle Initial Number:
Street Address City/State Zip Phone Number:
Code

If hired, can you provide evidence of legal eligibility to work in the U.S.?

Position Desired: Wage/Salary Desired: Full Time?
Part Time?

Date you can Are you 18 years of age or If under 18 years of age, you will
begin work? older? be required to submit a birth
certificate or work certificate as
required by state or federal law.

Name of high school City & State Graduate? GED?
attended:
Name of college or technical City & State Graduate? Degree? Major:
school:

Are you presently enrolled in If yes, give name & address of school and expected
school? degree date:

List any job-related skills or accomplishments, including military service:

- Your Availability For Work -

Monday Tuesday Wednesday Thursday Friday Saturday Sunday
From:
To:

Total hours per week you are Do you have any special requests or needs for a work
available to work: schedule?

- Give Three References That Are Not Former Employers Who We May Contact -

Name and Occupation How do you know them, and for how Phone Number

long?

Your Employment History

List names of employers with present or last employer listed first.

Please note if we may not contact your present employer until after you are offered a position.

Name of Employer:	Job Title:	
	Duties:	
Address:	Dates of Employment:	
	From:	To:
City, State, Zip Code	Hourly pay or salary:	
	Starting pay:	Ending
	pay:	
Supervisor:	Reason for Leaving:	
Telephone:		

Name of Employer:	Job Title:	
	Duties:	
Address:	Dates of Employment:	
	From:	To:
City, State, Zip Code	Hourly pay or salary:	
	Starting pay:	Ending
	pay:	
Supervisor:	Reason for Leaving:	
Telephone:		

Name of Employer:	Job Title:	
	Duties:	
Address:	Dates of Employment:	
	From:	To:
City, State, Zip Code	Hourly pay or salary:	
	Starting pay:	Ending
	pay:	
Supervisor:	Reason for Leaving:	
Telephone:		

CAREFULLY READ EACH STATEMENT BEFORE SIGNING AT THE BOTTOM

I certify that all of the information provided in this employment application are true and complete to the best of my knowledge, and I authorize investigation of all statements contained in this application, including a criminal background and credit history check. I understand that any false or incomplete information may disqualify me from further consideration for employment and may result in my immediate discharge if discovered at a later date.

I understand and acknowledge that unless otherwise defined by applicable law or written agreement with [Company name], any employment relationship with the [Company name] is considered “employment at will.” This means the Employee may resign at any time and the Employer may discharge the Employee at any time, with or without cause, and with or without advance notice.

I authorize the investigation of any or all statements contained in this application and also authorize any person, school, current employer, past employers, and other organizations to provide information concerning my previous employment and other relevant information that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I have read, understand, and agree to the above statements.

Signature:

Date: