



APPLICATION FOR EMPLOYMENT

PLEASE PRINT CLEARLY AND ANSWER ALL QUESTION. RESUMES ARE NOT A SUBSTITUTE FOR A COMPLETED APPLICATION.

TO APPLICANT: Please be advised that the following guidelines must be adhered to prior to submitting your application.

- Complete the application in your own handwriting.
- Show 100% complete names, addresses and phone numbers for all jobs within the last three (3) years.
- Be able to pass a drug screen.
- Present a valid Social Security Card and Photo ID.

If you are unable to comply with the above, please obtain the required information prior to submitting your application. Thank you.

APPLICANT INFORMATION

Position applying for: _____ Social Security Number: _____
 Name: _____ Telephone Number: _____
 Present Address (Street. Apt. or Unit No.) _____
 City: _____ State: _____ Zip Code _____
 In Case Of Emergency, Contact: _____ Telephone _____

GENERAL INFORMATION

Have you ever worked for this company before? _____ Dates: _____ To: _____
 Position: _____ Rate of Pay? _____ Reason for Leaving? _____
 Have you been convicted of any crime or felony? _____ if yes please explain: _____
 Who referred you to our company? _____

PHYSICAL HISTORY

Are you capable of manual work? _____ Are you capable of lifting 25lbs ____ 50 lbs. ____ 75 lbs. ____ Over 75 lbs.
 Any on the job injuries? _____ Describe injuries: _____
 Any back problems? Describe: _____
 How much time loss within the past 3 years due to illness _____ Have you received Worker's Compensation? _____
 Dates received? _____ Height _____ Weight _____

Education	School Name	Location	Graduate?	Years	Degree/ Diploma
High School					
College / Tech / Trade					

Our Company is an equal opportunity employer and will consider all applicants for all positions equally without regard to the race, sex, age, color, religion, national origin, veteran status or any disability.

LIST BELOW ALL PRESENT AND PAST EMPLOYMENT BEGINNING WITH MOST RECENT FOR PAST 3 YEARS

Name and Address of Company	Dates Employed
_____	From _____ To _____
_____	Job Title _____
Phone Number _____	Salary Rate _____
Supervisor's Name _____	Start Rate _____ Ending Rate _____
Reason For Leaving _____	

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Supervisor's Name _____	Start Rate _____ Ending Rate _____
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UNCONDITIONAL RELEASE

I agree to comply with all of the rules of this company. I hereby authorize the company to conduct any investigation it deems necessary with respect to information set forth on my application for employment. I also hereby authorize the company to release such information to gather with their opinions on these matters without any liability for any damage what so ever caused either directly or indirectly by giving or receiving such information or opinions.

I authorize any former employer, present employer or other persons to give any information they may have concerning by character, health, credit and employment records.

This certifies that this application was completed by me and no one else.

Date: _____ Signature _____ Print Name _____

Date: _____ Witness Signature _____ Witness Print name _____