



Equal Opportunity Employer

Application for Employment

Only completed and signed applications will be evaluated. Applications containing incomplete or "see résumé" responses will not be processed.

PERSONAL INFORMATION

NAME

Last

First

Middle

CURRENT ADDRESS

Street

City

State

Zip

HOME PHONE

CELL PHONE

WORK PHONE

POSITION FOR WHICH YOU ARE APPLYING

AVAILABILITY: FULL TIME PART TIME TEMP.

DATE AVAILABLE TO START

ARE YOU UNDER AGE 18? Y N

HAVE YOU APPLIED HERE BEFORE? Y N WHEN?

REFERRED BY: NEWSPAPER AGENCY FRIEND/RELATIVE OTHER:

DO YOU HAVE ANY RELATIVES WORKING HERE? Y N NAME:

OTHER NAME(S) BY WHICH YOU HAVE BEEN KNOWN

HAVE YOU EVER BEEN CONVICTED OF A FELONY? Y N

A conviction will not necessarily be a bar to employment.

This information will only be used for job-related purposes and only to the extent permitted by applicable law. List all crimes for which you have ever pled "guilty" to, been convicted of, or had prosecution deferred in connection with, or pled "no contest". **If none to all of the above, write NONE in the space below.** If any of all of the above apply, list the month and year, city, state, county, and country, whether a misdemeanor or felony, and the sentence.

M= Misdemeanor F= Felony

YEAR	OFFENSE	BRIEFLY EXPLAIN CIRCUMSTANCES	M= Misdemeanor F= Felony	
			M	F

HIGHEST LEVEL COMPLETED:

GRADES 9 10 11 12

YRS COLLEGE 1 2 3 4

MAJOR/DEGREE

HIGH SCHOOL NAME & LOCATION

COLLEGE NAME & LOCATION

POST GRADUATE DEGREES

SCHOLASTIC HONORS & PROFESSIONAL ORGANIZATIONS

OTHER TRAINING OR CERTIFICATION THAT CONTRIBUTES TO YOUR QUALIFICATIONS

HAVE YOU EVER SERVED IN THE MILITARY? Y N DATES: _____ to _____

RANK UPON DISCHARGE _____

TYPES OF EQUIPMENT AND SOFTWARE WITH WHICH YOU ARE PROFICIENT _____

Please provide three references that we can contact and who are able to evaluate your professional knowledge and abilities:

NAME	PHONE
TITLE	COMPANY
ADDRESS	

NAME	PHONE
TITLE	COMPANY
ADDRESS	

NAME	PHONE
TITLE	COMPANY
ADDRESS	

CERTIFICATION	<i>Read carefully before signing.</i>
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I certify that the information I have provided on this Application for Employment is true and complete. I understand and agree that employment with this company, if offered, may be immediately discontinued if misrepresentation, false statements or material omissions are found to have been made. I hereby authorize educational institutions, former employers and former supervisors to provide any and all information pertinent to my being considered for employment and hereby release those providing such information from any liability for doing so. I understand that employment, if offered, may be contingent upon negative drug testing results and a criminal background check. Proof of identity and employment eligibility for completion of a Form I-9 will be required, as well as additional information necessary for employee record purposes. I understand that, if employed, the company or I may terminate the employment relationship at any time, with or without cause, with or without notice, and that, if employed, employment does not constitute a contract of employment between myself and the company. If employed, I will abide by and conform to all company policies, rules and procedures as may be in effect from time to time. I understand that this application will become inactive in sixty days unless reactivated by me in person or in writing. I understand that, upon request, I will be provided a copy of my signed

Application for Employment. I have read the above, understand its content and meaning, and agree to all of its provisions.

APPLICANT'S SIGNATURE

DATE
