



APPLICATION FOR EMPLOYMENT

This Company is an equal opportunity employer. Applicants are considered for employment without regard to race color, national origin, religion, sex, age, handicap, disability, citizenship status, or any other basis prohibited by law, unless such basis constitutes a bona fide occupational qualification.

* PLEASE PRINT *

Date of Application _____

Name _____ LAST FIRST MIDDLE

Address _____ NUMBER STREET CITY STATE ZIP CODE

Telephone () _____ Cellphone () _____

Email: _____ Social Security Number XXX - XX - _____

If you have resided at your present address less than three years, list your prior address:

Address _____ NUMBER STREET CITY STATE ZIP CODE

APPLYING FOR:

- Office Warehouse
InsideSales/Counter Driver
Other

WOULD YOU WORK (Check all that apply)

- Full-Time Part-Time Summer
Specify days and hours if you answered part-time.

Are you 18 years or older? Yes No

If your application is considered favorably, on what date will you be available for work? _____

Are you on a lay-off and subject to recall? Yes No

Have you ever been employed here before? Yes No If yes, give date and reason for leaving _____

Why did you apply for a position at this Company? _____

Why do you think you would make a valuable employee of this Company? _____

Are you a U.S. citizen or an alien legally entitled to work in the position(s) for which you have applied?

Yes No

Have you ever been convicted of or pled guilty to a felony or misdemeanor other than a minor traffic violation?

(Conviction or plea will not necessarily disqualify applicant from employment.) Yes No

If yes, please explain _____

Have you ever been discharged or asked to resign from any position? Yes No If, Yes, please state the employer and dates of employment _____

Name of person we should notify in case of emergency _____

Address _____ Emergency Phone No. _____

PLEASE COMPLETE APPROPRIATE SECTION BELOW WITH REFERENCE TO POSITION FOR WHICH YOU ARE APPLYING

OFFICE/SALES COUNTER

SKILL	CHECK ONE		How Long Since Last Used	WPM
	On Job Experience	Course Work Only		
Typing				
Data Entry				
Computer*				
Word Processing				
Switchboard				
Calculator 10-key				
Accounts Receivable				
Accounts Payable				
Payroll				

WAREHOUSE/DRIVER

EQUIPMENT	What Equipment Have You Operated?	How Long Operated?
Forklift		
OTHER		

Can you lift up to 50 lbs? Yes No

***Computers:** Please list the software in which you are proficient:

Computer Spreadsheets _____
 Computer Word Processing _____
 Computer Data Base _____
 Computer Desk Top Publishing _____
 Other _____

Summarize special job-related skills and qualifications acquired from education, employment, volunteer work, or military service. _____

List specific skills or office machines, tools, machinery, or other equipment that you are trained on and can operate that will be helpful in performing the responsibilities of the position(s) for which you are applying. _____

Do you have any supervisory experience? (If yes, explain) _____

E D U C A T I O N

CIRCLE HIGHEST YEAR COMPLETED:	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4	1 2 3 4
	GRADE, TRADE OR HIGH SCHOOL	TECHNICAL, BUSINESS SCHOOL, OR COLLEGE	GRADUATE SCHOOL

NAME OF HIGH SCHOOL, COLLEGE, TECHNICAL, BUSINESS SCHOOL	LOCATION	GRADUATE	SUBJECT OF STUDY

EMPLOYMENT RECORD

Starting with your most recent job, list your employment experience. You may include job-related military service assignments and volunteer activities that reflect your qualifications for employment. List ALL your employment experience over the last 10 years. (More if you want). If you are submitting a resume, please fill out information on your most recent employer.

Employer	Employment Dates	Kind of Work Performed:
	From:	
Address	To:	
	Salary/Hourly Rate	
Telephone	Starting:	
Immediate Supervisor	Final:	
Employer	Employment Dates	Kind of Work Performed:
	From:	
Address	To:	
	Salary/Hourly Rate	
Telephone	Starting:	
Immediate Supervisor	Final:	
Employer	Employment Dates	Kind of Work Performed:
	From:	
Address	To:	
	Salary/Hourly Rate	
Telephone	Starting:	
Immediate Supervisor	Final:	

If you need additional space, please continue on a separate sheet of paper.

Which of the positions listed above did you like best? _____
 Why? _____

Which of the positions listed above did you like least? _____
 Why? _____

May we contact the employers listed above? Yes No If no, indicate which one(s) you do NOT wish us to contact, and state the reason why you prefer that we do not contact the employer(s). _____

PERSONAL REFERENCES

List the name, address, and telephone number of three references who are not related to you and are not previous employers.

1. _____

Name
Address
Telephone Number
2. _____

Name
Address
Telephone Number
3. _____

Name
Address
Telephone Number

State any additional information you feel would be helpful in considering your application.

Applicant's Statement

(Please indicate that you have read and that you understand each paragraph of the Applicant's Statement by placing your **INITIALS** beside each paragraph)

_____ I certify that this application was completed by me and that all entries on it and all information in it are TRUE and COMPLETE to the best of my knowledge. In the event of employment, I understand that false, misleading, or omitted information in my application may result in discharge.

_____ I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. In making this application for employment, I understand that an investigation may be made and information may be obtained through interviews with the personal references and past employers listed. This inquiry may include information as to my character, general reputation, and personal characteristics, as well as information about my work performance, work place conduct, and school transcripts. I consent to this investigation and to the consideration of any statements of references or former employers that are given in response to the inquiry.

_____ I hereby release all parties, including but not limited to The Company personal references, school/s, and previous employers, from any and all liability for any injury or damage that may result from their furnishing information to The Company concerning me or any action The Company takes on the basis of such information.

_____ I understand that, according to federal law, all individuals who are hired must, as a condition of employment, produce certain documentation to verify their identity and United States citizen status or, if aliens, their legal authorization to work in the United States. As a consequence, I understand that any offer of employment to me by The Company is contingent upon my ability to produce the required documentation within the time period required by law.

_____ I understand that this application is not, and is not intended to be, a contract of employment and that any resulting employment relationship is for no fixed period of time and is terminable at any time and for any reason by The Company or by me. I further understand that statements which may be contained in policies, practices, handbooks, or other company material do not create any guarantee of employment and that the company has the right to modify, amend, or terminate policies, practices, benefits plans, or other programs within the limits and requirements imposed by law. I understand that no representative of The Company other than an officer, has the authority to enter into any agreement for any specific period of time or to make any agreement contrary to the foregoing and that any such agreement must be in writing to be binding on The Company.

_____ Date

_____ Signature of Applicant

THIS APPLICATION WILL NOT BE CONSIDERED ACTIVE AFTER 90 DAYS