Proof of citizenship or immigration status will be required upon employment.



Application For At-Will Employment

THIS APPLICATION IS NOT AN EMPLOYEMENT CONTRACT, but is merely intended to evaluate suitability for employment. It is our policy to provide equal opportunity for employment to all qualified persons without discrimination based on sex, race, color, religion, age, marital status, national origin, citizenship, disability, veteran status, or any other status protected under state or federal law. It is also our policy to conduct pre-employment screenings before a job offer is made. If a job offer is made, employment may be contingent upon successful completion of a medical examination, which may include providing body substance samples and the completion of a background check.

This application for employment will not be considered unless fully completed. (PLEASE PRINT) APPLICANT INFORMATION:

Last Name		First Name	e Middle Name
Address	Street	City	State Zip Code
Contact Telephone	Number:		Mobile Phone Number:
Driver's License #	Expira	ation Date	E-mail Address
Employment Desired	:	Full Time	Part Time Shift Work Temporary
Position:			Date You Can Start:
Have you ever filed an app	plication with us before	e? 🗆 yes 🗆 no	Are you currently employed? 🗌 yes 🗌 no
Have you ever been emplo	oyed with us before?	🗆 yes 🛛 no	May we contact your current employer? $\ \square$ yes $\ \square$ no
Can you travel if a job req	uires it? 🛛 yes	□ no	Are you prevented from lawfully becoming employed in this country because of visa or immigration status?

EDUCATION:

School	Name of School & Location	Graduated		Major Subject/Degree
Grammar School		Yes	No	
High School		-		
College		-		
Other (specify)				

Subjects of special study or research work:

Special Training or Qualifications:

Activities (Civic, Athletic, Etc.)

You may exclude membership that would reveal sex, race, color, religion, age, marital status, national origin, citizenship, disability, veteran status, or any other status protected under State or Federal law.



Application For At-Will Employment

FORMER EMPLOYERS: List your employers for the past ten years, starting with the most recent. If you need additional space, please continue on a separate sheet of paper.

Date, Month, & Year	Name, Address, and Telephone # of Employer	Position	Reason for Leaving
From			
То			
From			
То			
From			
То			
From			
То			
From			
То			
From			
То			
From			
То			

REFERENCES: Provide the names of three persons, not related to you, whom you have known at least one year.

Name	Address and Telephone Number	Years Acquainted
1.		
2.		
3.		

APPLICANT'S STATEMENT:

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application shall be considered active for a period not to exceed 45 days.

I UNDERSTAND AND ACKNOWLEDGE THAT, IF HIRED, MY EMPLOYMENT RELATIONSHIP WITH THIS ORGANIZATION WOULD BE OF AN "AT-WILL" NATURE, WHICH MEANS THAT THE EMPLOYEE MAY RESIGN AT ANY TIME AND THE EMPLOYER MAY DISCHARGE THE 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 CONDUCT UNLESS AN AUTHORIZED EXECUTIVE OF THIS ORGANIZATION SPECIFICALLY ACKNOWLEDGES SUCH CHANGE IN WRITING.

Date_____

APPLICANT - DO NOT WRITE BELOW THIS LINE

Interviewed by: Remarks:			Date	
Employment Approved :				
Employment Approved .	Phil or Paul Ayers	Start	Salary/Hourly	
		Start	Salary/HOURIV	