

Application for Employment

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Name		Today's Date:				
Last		First		Middle_	Middle	
Street Address:						
City	State	ZIP				
Main Telephone Number: _			Email Address:			
Social Security #:		_	Date of Birth:			
Position(s) applying for:						
How did you hear of this op	pening?		If referred	, by who?		
When can you start?		De	esired Starting Wage \$_			
Are you a U.S. citizen or otl provide documentation.) □		ized to work in	the U.S. on an unrestric	t ed basis? (You may be	required to	
Are you looking for full-tim	e employment	:? ☐ Yes ☐ No	If no, what hours are	you available?		
Have you ever been convic	ted of a felony	? (This will not n	ecessarily affect your ap	plication.) 🗖 Yes 🗖 N	lo	
If yes, please describe cond	litions					
Education Sci	nool Name and	Location	Υε	ear Major	Degree	
High School						
College						
College						
Post-College						
Other Training						
In addition to your work his	tory, are there	other skills, qua	lifications, or experience	that we should conside	er?	

Employment History (Start with most recent employer)

Company Name:			
Address:		Telephone:	
Date Started:	Starting Wage:	Starting Position:	
Date Ended:	Ending Wage:	Ending Position:	
Name of Supervisor: _			
May we contact? ☐ Ye	es 🗖 No		
Responsibilities:			
Reason for leaving:			
Company Name:			
Address:		Telephone:	
Date Started:	Starting Wage:	Starting Position:	
Date Ended:	Ending Wage:	Ending Position:	
Name of Supervisor: _			
May we contact? ☐ Ye	es 🗖 No		
Responsibilities:			
Reason for leaving:			
Address:		Telephone:	
Date Started:	Starting Wage:	Starting Position:	
Date Ended:	Ending Wage:	Ending Position:	
Name of Supervisor: _			
May we contact? ☐ Ye	es 🗖 No		
Responsibilities:			
Reason for leaving:			

Attach additional information if necessary.

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or executive of this company, other than the president, has any authority to alter the foregoing.

Signature	Date

INTERVIEW DETAILS/COMMENTS				
Interview Date:	InterviewTime:	Location:		
Interview conducted by:				
Notes/Comments:				
Position Offered? Yes No	If yes, starting date?			
	Location: AAR CLR Elgin	EW Gilberts		