

Date: _____

| PERSONAL INFORMATION | |
|---|-------------|
| <i>Please TYPE or PRINT all information legibly</i> | |
| NAME (First and Last): | |
| ADDRESS: Street Number and Name, City, State, Zip Code | Home Phone: |
| EMAIL ADDRESS: | Cell Phone: |
| PREVIOUS ADDRESS: Street Number and Name, City, State, Zip Code | |

| EMPLOYMENT DESIRED | | | | |
|--|--------------------------|--|--------|-------|
| POSITION desired: | Date Available | Salary desired \$ | | |
| Are you presently employed? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | |
| If yes, may we contact your present employer? <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | |
| Have you ever applied at this company before? | | Have you ever been employed by this company before? | | |
| <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, when? | | <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, when? | | |
| EDUCATION AND TRAINING | | | | |
| SCHOOL NAME & LOCATION | Graduate? | | Degree | Major |
| | YES | NO | | |
| High School | <input type="checkbox"/> | <input type="checkbox"/> | | |
| College/University | <input type="checkbox"/> | <input type="checkbox"/> | | |
| College/University | <input type="checkbox"/> | <input type="checkbox"/> | | |
| Highest Degree Earned (<i>Select ONE</i>) | | | | |
| <input type="checkbox"/> High School <input type="checkbox"/> Associate <input type="checkbox"/> Bachelor <input type="checkbox"/> Master <input type="checkbox"/> Doctorate | | | | |
| Additional Education, Vocational and/or Professional Information such as special areas of research or study, seminars, etc. Please attach any written resume or other summary of information that is relevant to the position for which you are applying. If familiarity with a foreign language is listed on the job description, please describe your foreign language skills below. | | | | |

EMPLOYMENT DATA

| Please list in order of the most recent employment first | | Additional Comments |
|--|---|---------------------|
| Company Name: | Phone: | |
| Dates of Employment: | | |
| From: | To: | |
| Address (Include Street, City, State, Zip Code): | | |
| Job Title: | Base Rate of Pay: Start: \$ Final: \$ | |
| Supervisor (Name & Title): | | |
| Description of Job Duties: | | |
| Reason for Leaving: | | |
| Company Name: | Phone: | |
| Dates of Employment: | | |
| From: | To: | |
| Address (Include Street, City, State, Zip Code): | | |
| Job Title: | Base Rate of Pay: Start: \$ Final: \$ | |
| Supervisor (Name & Title): | | |
| Description of Job Duties: | | |
| Reason for Leaving: | | |
| Company Name: | Phone: | |
| Dates of Employment: | | |
| From: | To: | |
| Address (Include Street, City, State, Zip Code): | | |
| Job Title: | Base Rate of Pay: Start: \$ Final: \$ | |
| Supervisor (Name & Title): | | |
| Description of Job Duties: | | |
| Reason for Leaving: | | |

REFERENCE DATA

Professional/work references that we may contact, please do not list friends or family.

| Name | E-Mail | Phone Number | Relationship |
|------|--------|--------------|--------------|
| | | | |
| | | | |
| | | | |

PRE-EMPLOYMENT CERTIFICATION

AUTHORIZATION

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

I understand that a consumer credit report or criminal records check may be necessary prior to my employment. If such reports are required, I understand that, in compliance with federal law, the company will provide me with written notice regarding the use of those reports and will also obtain a separate written authorization from me to consent to these reports. I also understand that a poor credit history or conviction will not automatically result in disqualification from employment."

In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

Applicant Signature

Date

----- DO NOT WRITE BELOW THIS LINE -----

Date

Interviewed By

| REMARKS | |
|--------------------|---------------------|
| | |
| | |
| Abilities | |
| | |
| Hired | For Dept. |
| | |
| Position | |
| | |
| Will Report | Salary Wages |
| | |

APPROVED:

Employment Manager

Department Head

General Manager