Application For Employment

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

(PLEASE PRINT) Date of Application			
Position(s) Applied For			_
Referral Source:AdvertisementEmployment Age	Friend _	Relative	Walk-In
NameLast			
		Mi	ddle
Address P.O. Box or Street Name and Number			
P.O. Box or Street Name and Number Telephone () Area Code	City Social Security 1	State Number	Zip Code
Date of Birth: D	river's License Nu	mber:	
If employed and you are under 18, can			
Have you filed an application here before	re? YES _	_NO	
Have you ever been employed here before	ore?YES	_NO	
Are you employed now?YES	NO		
Are you prevented from lawfully become In this country because of Visa or Immi (Proof of citizenship or immigration status will be required to	gration Status?	YES N	O
On what date would you be available for	work?		
Are you available to workFull Time			Temporary
Are you on lay-off and subject to recall	?YES	NO	
Can you travel if a job requires it?	YESNO		
Have you ever been convicted of a felon Conviction will not necessarily disqualify applicant from end If Yes, please explain	mployment)	7 years? N	IOYES

Employment Experience

Start with your present or last job. Include military service assignments and volunteer activities. You may exclude organization names which indicate race, color, religion, gender, national origin, handicap or other protected status.

Employer	yer Telephone		ployed	Work Performed
Address		From	То	
Job Title		Hourly Starting	y Salary/Rate Final	
Supervisor				
Reason for Leaving				1100
Employer	loyer Telephone		ployed	Work Performed
Address		From	То	
Job Title		Hourly Starting	/ Salary/Rate Final	
Supervisor		- Starting	2 413(1)	
Reason for Leaving				
Employer	nployer Telephone		ployed	Work Performed
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Supervisor				
Reason for Leaving				
Employer	oloyer Telephone		oloyed	Work Performed
Address		From	То	
Job Title		Hourly: Starting	Salary/Rate Final	
Supervisor				
Reason for Leaving				

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

Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment or other experience

Are	You a Veteran of the	U.S. Military Service?	YESNO)
If Y	ES, Branch	······	·	
Indicate langua	ages you speak, read,	and/or write.		
	FLUENT	GOOD	FAIR	
SPEAK				
READ				
WRITE				
	or handicap or other p	ich would reveal sex, i protected status):	ace, rengion, nau	onai origin,
Give name, ad employers.	dress and telephone n	umber of three referen	ces who are not re	elated to you and are not previous
Or Mental Has Government c requires that the the Vietnam E	andicaps. ontractors are subject ney take affirmative acra, and Section 503 of	to 38 USC 2012 of the ction to employ and ad f the Rehabilitation Ac	e Viet Era Vetera vance in employn t of 1973, as amer	ns, and Individuals With Physical ns Readjustment Act of 1974 which nent qualified disabled veterans of nded, which requires government tt qualified handicapped individuals.
information w	=	s confidential. Failure	- -	invited to volunteer this formation will not jeopardize or
	ou wish to be identifie Handicapped Individu	ed, please sign below. alDisabled Vet	eranVietnam	a Era Veteran
Sign	ed			

Education

NAME AND TITLE

	I	Elementary			High				College/University			Graduate/ Professiona			
School Name						•••									
Years	4	5	6 7	8	9	10	11	12	1	2	3	4	1	2	3
Completed/Degree															
Diploma/Degree															
Describe Course	7														
Of Study:															
Describe Specialized Training, Apprenticeship, Skills and Extra-Curricular Activities			•••												•••
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DATE

Applicant Data Record

Applicants are considered for all positions, and employees are treated during employment without regard to race, color, religion, sex, national origin, age marital or veteran status, medical condition or handicap, or any other legally protected status.

As employers/governmental contractors, we comply with government regulations, including affirmative

action responsibilities where they apply.

Solely to help us comply with government record keeping, reporting and other legal requirements, we request that you please fill out the Applicant Data Record. We appreciate your cooperation.

This data is for periodic government reporting and will be kept in a Confidential File separate

From the Application for Employment, YOUR COOPERATION IS VOLUNTARY.

(PLEASE PRINT)
Date
Position(s) Applied For
Referral Source: Advertisement Friend Relative Walk-In
Employment Agency Other
Name Middle
Address P.O. Box or Street Name and Number City State Zip Code
Voluntary Survey
Government agencies at times require periodic reports on the sex, ethnicity, handicapped, veteran and other protected status of applicants. This data is for analysis and possible affirmative action only. SUBMISSION OF INFORMATION IS VOLUNTARY.
Check one:MaleFemale
Check one of the following: Race/Ethnic Group: American Indian/Alaska Native Asian/Pacific Islander White Black Hispanic
Check if any of the following are applicable: Vietnam Era Veteran Disabled Veteran Handicapped Individual