



EMPLOYMENT APPLICATION

Notice: Applicant should read the following information carefully before filing out any of the questions on this form. We are an equal opportunity employer and fully subscribe to the principles of equal opportunity. It is our policy to seek and employ the best qualified personnel in all positions without regard to race, color, religion, age, sex, disability, national origin or any other basis made unlawful by either state or federal law. It is our policy to comply with all federal and state employment statutes. Information requested on this application will not be used for any purpose prohibited by law.

PERSONAL

Last Name		Fist Name		Middle Name	
Current Mailing Address		Street	City	State	Zip
Permanent Address (if different from above)		Street	City	State	Zip
Phone Number:	Cell Phone Number (If applicable)		Email Address:		
Are you Legally authorized to work in the USA ? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No					

POSITION APPLYING FOR

Employment Desired <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal / Temporary								
TOTAL HOURS Available for Week	Hrs Available	MON	TU	WED	THU	FR	SAT	SUN
	From							
	To							
Can you work weekends? Yes <input type="checkbox"/> No <input type="checkbox"/>		Can you work Overtime , if needed? Yes <input type="checkbox"/> No <input type="checkbox"/>						
		What shift(s) are you available ? Day <input type="checkbox"/> Eve <input type="checkbox"/> Swing <input type="checkbox"/> Graveyard <input type="checkbox"/>						
Have you ever been convicted for a crime other than a major traffic violation? (This information will be considered in hiring or job placement but will not automatically disqualify you for employment) Yes <input type="checkbox"/> No <input type="checkbox"/>								
If yes, Explain:								

EDUCATION

Highest Grade Completed	Post Secondary	Other (Specify)
7 8 9 10 11 12	1 2 3 5	
Any Sports or Activities ? Yes <input type="checkbox"/> No <input type="checkbox"/> Specify:		

EMPLOYMENT RECORD

Name , Address & Phone # of Present Employer	Employment Dates	
	From ___/___/___ to ___/___/___	
Reason for Leaving:	Start Pay	Last Pay
	Describe the Work You Did:	
Name , Address & Phone # of Most Recent Employer	Employment Dates	
	From ___/___/___ to ___/___/___	
Reason for Leaving:	Start Pay	Last Pay
	Describe the Work You Did:	

1. I authorize investigation of all statements contained in this application 2. I understand that misrepresentation or omission of facts called for is cause for dismissal and that my employment is substantially dependent on truthful answers to the forgoing inquires. 3. I have read these statements and answers to these inquires. pleas circle either Yes No

Date ___/___/___

Signature _____

MICHAEL'S USE ONLY

INTERVIEW DATE ___/___/___

DATE HIRED ___/___/___

INTERVIEW TIME _____:_____ AM PM