Application for Employment Long Form

Instructions: It is the policy of the Company to provide equal opportunity with regard to all terms and conditions of employment. The Company complies with federal and state laws prohibiting discrimination on the basis of race, color, religion, sex, national origin, disability, veteran status, age, or any other protected characteristic.

Please Print							
Position applied for		Application Date:/_					
Name	FIRST	MIDDLE					
Address	QTY	STATE	ZIP CODE				
	()	dress:					
Shift preferred	☐3 ☐Any Expected	pay					
Would you accept full-time work?	☐ Yes ☐ No Would you accept part-time work	? ∐Yes □No					
On what date would you be available	for work?						
How were you referred to our Comp	any?						
Have you ever been employed here?	☐ Yes ☐ No If yes, please give dates						
Is this application a request for reemplifyes, additional information may be	ployment following an extended military leave of absence requested.	e from our Company?	□No				
If you are under 18 years old, can you	a provide a work permit if required? ☐ Yes ☐ No						
Are you legally eligible for employme	ent in the United States? (If yes, proof is required if hired	l.) Yes No					
Are you able to perform the "essential functions" of the job for which you are applying (with or without reasonable accommodation)? This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage, to the extent permitted by law. Yes No Need more information about the job's "essential functions" to respond.							
Will you travel if required?	☐ Yes ☐ No						
Will you work overtime if required?	☐ Yes ☐ No						
Have you ever been bonded?	☐ Yes ☐ No						
Please provide your driver's license n	umber, if driving is required for this job	State					
way, restrict your ability to work for o	with any former employer or other party (such as a nonco our Company? Yes No		•				
seriousness and nature of the violation disclose sealed or expunged records of Have you ever pleaded "guilty" or "no	stion does not constitute an automatic bar to employment n, rehabilitation and position applied for will be taken into f conviction or arrest or expunged juvenile records of con contest" to, or been convicted of, a felony?	o account. Note: You are not obli wiction or arrest. No					

Employment Experience

Place an X by the employer(s) you DO NOT want us to contact. List your most recent employer first.

	Employer				
	Contact Name				
	Address		Phone ()	
	Job Title				
	Dates employed: from (mm/yy) / to (mm/yy) /	Hourly rate/salary: starting	/	_ final	/
	Work performed				
	Reason for leaving				
	Employer				
	Contact Name				
	Address				
	Job Title				
	Dates employed: from (mm/yy)/ to (mm/yy)/	-			
	Work performed				
	Reason for leaving				
	0				
\Box	Employer				
	Employer				
	Contact NameAddress				
	Job Title	-			
	Work performed				
	Reason for leaving				
Ex	plain any gaps in your employment, other than those due to personal	illness, injury or disability.			
	701 / 1 /	, , , , , , , , , , , , , , , , , , , ,			
Ha	we you ever been fired or asked to resign from a job? \square Yes \square N	lo			
If y	es, please explain				

Education Background High School: _____ Location ____ _____Location College: _____ Did you graduate? 🔲 Yes 🔲 No Degree or diploma _____ Course of study ___ Graduate School: ___ _____Location _____ Location _____ Vocational Training/Other: _____ Course of study Did you graduate? Yes No Degree or diploma Continuing Education: Special Training or Skills Languages, machine operation, etc., that would be of benefit in the job for which you are applying. References List names and telephone numbers of three business/work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are **not** related to you. Years Name Title Relationship to You Telephone E-Mail Known Anti-Discrimination Clause This Company does not tolerate unlawful discrimination or harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state or local laws. No question on this application is used to limit or exclude an applicant from employment consideration. Harassment of our employees is strictly prohibited, whether it is committed by a manager, coworker, subordinate or nonemployee (such as a vendor or customer). Examples of prohibited harassment include, but are not limited to, unwelcome physical contact, comments, jokes, or epithets, threats, insults, name-calling, offensive gestures, negative stereotyping, possession or display of derogatory pictures or other graphic materials, and any other words or conduct that demean, stigmatize, intimidate, or single out a person because of his/her membership in a protected category. The Company takes all complaints of harassment seriously, and each will be investigated promptly and thoroughly. Social Security Number _____ The Company will make reasonable efforts to safeguard the privacy of this information and will use it

only for employment purposes.

Applicant Statement

Applicant's signature _

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false or misleading information, omissions or misrepresentations are discovered, my application may be rejected, and if I am employed, my employment may be terminated at any time.

If hired, I agree to conform to the Company's rules and regulations, and I understand that these rules and/or the employee handbook do not form a contract of employment either express or implied, and I agree that my employment and compensation can be terminated, with or without cause and with or without notice, at any time, at either my or the Company's option.

I also understand and agree that the terms and conditions of my employment may be changed, with or without cause and with or without notice, at any time by the Company. I understand that no Company representative, other than its president, and then only when in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the forgoing.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, résumé or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives for seeking, gathering and using truthful and nondefamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

_ Date ___

		FOR	OFFICE USE ON	LY:			
pplicant number _		Employee number			Н	Hire date	
	C				Skill		
Interview Resul	ts						
		Intervi	ewer			Date	
Test Results							
Tests Administered			Date		Score	Rating	
Pafaranca Chas	le Dogulte						
Reference Check Results Reference Name			Date Contacted		Con	ntacted By	
Attachmei	nts						
Résumé	☐ Applicant intervie	ew notes	☐ Applicant refe	rence no	tes 🔲 Test	results	

