Name Date

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer All statements made by applicants for employment on this application form will be checked for accuracy. We offer equal employment opportunities to all persons without discrimination on the basis of race, color, sex (including gender identity and sexual orientation), marital status, religion, age, national origin, genetic information, citizenship status, pregnancy and related medical conditions, physical or mental disability, or past, present, or future service in the Uniformed Services of the United States, or any other basis prohibited by local, state, or federal law. The use of this form does not mean there are positions open and does not obligate us in any way.

An Equal Opportunity Employer

	PER	SONAL INFORMATION			
Name (Print)			Home or Nearest Phone		
Present Address			Social Security No		
_					
(City)	(State)	Zip)			
Contact in Case o	f Emergency				
		Name)	(Telepho	one Number)	
If at present addre	ess less than one year, please give pr	evious address			
Are you at least 1	•	(Employment is subject to			
	documented proof of your identity a r's license, Social Security card, bir			☐Yes ☐ No	
Position(s) applied fo	r	How soon o	could you report to work?		
	desired □ Full-Time □ Part-Time				
What days and hours,	, if part-time? Days	Hours	From () AM t		
		EDUCATION	From () AM t	o () PM	
Type of School	Name and Address of School	Courses Majored In	Check Last Year Completed	Graduate? Show Degree	
Elementary/Middle			5 6 7 8		
High School			9 10 11 12		
College			1 2 3 4		
Post Graduate					
How did you come to	apply?		wspaper Ad High Sci	hool Recruitment	
Have you ever been b	oonded?	Have you ever been ref	used a bond Yes	□ No	
If yes, state reason an					
	convicted of a violation of the law except, and place where offense occurred				
Hove you ever been d	lischarged or requested to resign from a			m employment)	
Are you employed no		ay we contact your present empl			
	position of trust (handling money or co		·	,	
	position of trust (nanding money of co.	inidential material)?	NO		
If yes, describe	ion to ballove that year111 1'cc	ulter mooting this	rk schedules?	□ No	
	son to believe that you would have diffic				
Are you able to perform the essential functions of the position applied for, with or without reasonable accommodations? $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$					

PRIOR WORK RECORD (Start with most recent or present employer and complete in full.) Name and Address of Most Recent Employer Telephone No. Date Hired Immediate Supervisor (Name & Position) Starting Rate Job Title & Duties Last Rate Date Left Reason for Leaving May we contact this employer? ☐ Yes \square No Name and Address of Former Employer Telephone No. Date Hired Starting Rate Immediate Supervisor (Name & Position) Last Rate Job Title & Duties Date Left Reason for Leaving May we contact this employer? ☐ Yes \square No Name and Address of Former Employer Telephone No. Immediate Supervisor (Name & Position) Date Hired Starting Rate Job Title & Duties Date Left Last Rate Reason for Leaving May we contact this employer? \square Yes ☐ No Please provide any additional information such as special skills, training, experience, equipment operation, or other qualifications you feel will be helpful to us in considering your application. REFERENCES (Do not list relatives or former employers) Name Address Telephone Name Address Telephone Name Address Telephone **Job Applicant's Agreement and Certification** "I certify that the information given by me in this application is true in all respects, and I agree that if the information given is found to be false in any way, it shall be considered sufficient cause for denial of employment or discharge. I authorize the use of any information in this application to verify my statements, and I authorize past employers, all references, and any other persons to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damages on account of having furnished such information." "I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between the company and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the company unless made in writing. If an employment relationship is established, I understand that I have the right to terminate my employment at any time and that the company retains the same right." "If I am offered employment, I agree to submit to a physical examination whenever requested, and I understand my becoming employed and/or my continued employment are subject to the results of any physical examination related to my job duties in accordance with company policies and procedures. "I understand that if employed, policies, and rules which are issued are not conditions of employment and that the employer may revise policies or procedures in whole or in part, at any time." "I understand that this application will be kept on active file for 60 days from the date completed, after which time I would have to reapply in accordance with established company procedures." (Signature of Applicant) (Date)