



Client ID # _____

APPLICATION FOR EMPLOYMENT

Equal Opportunity Employer: Our company does not discriminate on the basis of race, color, religion, sex, national origin, age, marital or veteran status, disability, or any other status protected under applicable law.

NAME AND ADDRESS

Application Date		
Last Name	First Name	Middle Initial
Street Address		
City	State	Zip Code
Home Phone Number ()		Alternative Phone Number ()
Emergency Contact	Phone Number	Relationship

POSITION DESIRED

Position applied for:	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time — If part time, please list hours available:
Salary Expected:	Date Available:	
Are you available to work whatever schedule is necessary to help us meet our Corporate objectives and our obligations to our clients? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If no, what shifts or days are you available?		

PERSONAL INFORMATION

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	
Do you have reliable transportation get to work each day? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, please explain.			
To your knowledge, have you ever been employed by this Company or a subsidiary? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, where?			
When?	Position?	Reason for leaving?	
Names and relationships of relatives or acquaintances employed by this Company:			
Referral Source: <input type="checkbox"/> Walk-In <input type="checkbox"/> Advertisement <input type="checkbox"/> Other (please specify): _____			
<input type="checkbox"/> Job Service <input type="checkbox"/> Employee Referral (if so, name of employee): _____			

EDUCATION

THE FOLLOWING INFORMATION WILL BE USED ONLY TO THE EXTENT RELEVANT TO THE QUALIFICATIONS AND POSITION FOR WHICH YOU APPLY.																
Circle the highest grade completed.																
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	+
Do you have a high school diploma or GED? <input type="checkbox"/> Yes <input type="checkbox"/> No																
Did you earn a degree from college? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, year awarded:																
If yes, name of college: _____ Degree: _____																

Have you ever been sued in a civil action with regard to the death of or personal injury or intentional damage to any person or to any property? Yes No
 If yes, give details concerning the nature of the claims and defenses raised by the parties, the outcome of the action (e.g., settlement, jury verdict, or other disposition), and any other circumstances you deem relevant to a full understanding of what occurred (attach additional sheets if necessary).

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No

Are you currently engaged in using illegal drugs? Yes No

WORK HISTORY

Have you ever been granted a military or government security clearance? Yes No If yes, level of clearance:

Do you have any special job skills or qualifications that may be relevant to the position for which you are applying? If so, please describe:

List all employment, including military, for the past seven (7) years beginning with your present or last job held.
 If you need additional space, continue on a plain sheet of paper and attach it to this application.

From (mm/yy)	Employer:			
To (mm/yy)	Address:	City:	State:	Zip Code:
Salary	Supervisor:	Phone: ()		
Job Title:		Reason for leaving:		
Job Duties:				

From (mm/yy)	Employer:			
To (mm/yy)	Address:	City:	State:	Zip Code:
Salary	Supervisor:	Phone: ()		
Job Title:		Reason for leaving:		
Job Duties:				

WORK HISTORY (CONT'D)

From (mm/yy)	Employer:		
To (mm/yy)	Address:	City:	State: Zip Code:
Salary	Supervisor:	Phone: ()	
Job Title:		Reason for leaving:	
Job Duties:			

From (mm/yy)	Employer:		
To (mm/yy)	Address:	City:	State: Zip Code:
Salary	Supervisor:	Phone: ()	
Job Title:		Reason for leaving:	
Job Duties:			

Have you ever been dismissed or asked to resign from employment? Yes No

If yes, provide a brief explanation, including the name of the employer, approximate date, and any relevant circumstances:

REFERENCES

Please list the names, addresses, and phone numbers of five people who are not related to you and who are not former employers:

Name and Occupation	Address	Phone

UNDERSTANDINGS AND AGREEMENTS

I understand that any misrepresentation, falsification or omission of this application shall be sufficient reason for refusal to hire or, if discovered after employment has begun, dismissal of my employment. I hereby authorize investigation of all matters contained in this application and agree that if the results of such investigation are not satisfactory, any offer of employment may be withdrawn, or, if applicable, my employment may be terminated immediately. I agree to conform to and adhere to the rules and regulations governing my employment. Further, I understand and agree that this application and any other materials I may receive are not intended to be, nor shall be construed to be a contract of employment, and that my employment and compensation may terminate, with or without cause, and with or without notice, at any time, at the option of either myself or my employer.

In consideration of any offer of employment, I hereby acknowledge, understand and agree that the following will constitute terms and conditions of any such employment:

Any losses or expenses incurred by my employer, its clientele, or other third parties as a result of my unauthorized actions shall be immediately reimbursed to my employer on terms that are satisfactory and acceptable to my employer. To the extent permitted by law, I agree and hereby authorize my employer to reduce my wages for any sums owing by me hereunder.

Signature of Applicant

Date



Interviewer:	Hiring Supervisor:
Date:	Start Date:
Department:	Position:
Rate of Pay:	