

Employment Application

This company is an equal opportunity employer dedicated to nondiscrimination in employment. The company selects the best qualified individual for the job based on job-related qualifications regardless of race, age, color, religion, sex, national origin, ancestry, marital status, sexual preference, disability, or any other basis protected by applicable law.

Print clearly and complete ALL information requested.

Name _____
First Middle Initial Last

Present Address _____
Street city State Zip

Permanent Address (if different) _____
Street city State Zip

Phone Number _____ Email _____ SSN _____

If you are hired, can you furnish proof that you are over 18 years of age? yes no

If you are hired, can you present evidence of you legal right to live and work in this country required by law? yes no

Do you have a current, valid driver's license? yes no

Are you able to satisfactorily perform the essential job duties required of the position for which you are applying, either with or without a reasonable accommodation? Including climbing ladders, working on roofs, overnight and out of state travel and long hours of manual labor. yes no

Position Desired _____ Date you can Start _____ Desired Salary _____

Which do you prefer? full-time part-time during the following days and hours _____

Are you employed now? yes no If so, may we contact your current employer? yes no

Have you ever applied or worked for this company before? yes no If yes, specify dates _____

Additional training, skill, and specialized achievements relevant to position _____

Have you served in the United States Armed Forces? yes no Branch _____ Final Rank _____

Education	Name of School	City and State	# of Years Completed	Did you Graduate?	Degree(s) Earned
High School					
College					
Graduate					

List present and past employers beginning with the most recent. Attach additional sheets as needed.

Month/ Year	Name & Address Of Employer	Initial Position & Duties	Starting Pay	Previous Supervisor	Reason for Leaving
		Final Position & Duties	Ending Pay	Phone Number	
From:					
To:					
From:					
To:					
From:					
To:					

Have you ever been terminated or asked to resign from any job? yes no If yes, please explain circumstances _____

Please fully explain any gaps in your employment history _____

How many days of work have you missed in the last three years due to reasons other than paid holidays and vacation?

0-10 Days 10-30 Days 30+ Days

Do you have adequate and reliable transportation to and from work? yes no

Do you have any friends or relatives who work for the company? yes no If yes, who? _____

List three personal references who know you well but who are not previous employers or relatives.

Name	Address	Phone Number	Relationship

This application will be considered active for a maximum of sixty (60) days. If you wish to be considered for employment after that time, you must call and reapply.

I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE AND ACCURATE.

X _____
Signature of Applicant Date