



EMPLOYMENT APPLICATION

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available	Desired Salary		
Position Applied for			
Are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Have you ever worked for this company? YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when?			
Have you ever been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain			

WORK AVAILABILITY (FOR PRODUCTION POSITIONS ONLY, PLEASE CIRCLE SHIFTS AVAILABLE TO WORK)			
	7:30A-4:00P		4:00P-12:30A
1ST SHIFT	AND/OR	2ND SHIFT	AND/OR
	6AM-6PM		6PM-6AM
IS THERE ANY REASON(S) OR RESTRICTION(S) THAT WILL KEEP YOU FROM COMING IN TO WORK AS SCHEDULED AND PERFORM THE JOB DUTIES YOU ARE ASSIGNED? PLEASE LIST DETAILS BELOW. YES <input type="checkbox"/> NO <input type="checkbox"/>			
THERE ARE CERTAIN TIMES OF YEAR WHEN THE COMPANY SCHEDULES YOU TO WORK SEVEN DAYS A WEEK, IS THERE ANY REASON THAT WOULD PROHIBIT YOU TO COMPLY WITH THE SCHEDULING? YES <input type="checkbox"/> NO <input type="checkbox"/>			
COMMENTS & RESTRICTIONS:			
REFERENCES		MAY WE CONTACT YOUR REFERENCES? YES <input type="checkbox"/> NO <input type="checkbox"/>	
<i>Please list two professional references (preferably previous supervisors).</i>			
Full Name		Relationship	
Company		Phone ()	
Address			
Full Name		Relationship	
Company		Phone ()	
Address			

EMPLOYEE REFERRAL & BY WHOM: _____

APPLICANT

PLEASE ANSWER ALL OF THE QUESTIONS

PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date



APPLICANT