



## EMPLOYMENT APPLICATION

Each question should be answered completely. No action will be taken on this application until all questions have been answered. Please write legibly. DO NOT substitute "See Resume" for information requested on the application form. PLEASE PRINT, except for the required signature. All information provided will be available only to persons who have a "need to know" or as required by law. The Company will make reasonable accommodation in the application and interview process for any disabled applicant who may need it. This application is valid ONLY for the position listed below.

**This application is current only for thirty (30) days, at the conclusion of which time, if you have not heard from us and still wish to be considered for employment, it will be necessary for you to fill out a new application.**

NAME (Print) \_\_\_\_\_ TODAY'S DATE \_\_\_\_\_  
*LAST FIRST INITIAL*

PRESENT ADDRESS \_\_\_\_\_ PHONE # \_\_\_\_\_  
*NO. CITY STATE ZIP DAY EVENING*

POSITION APPLIED FOR \_\_\_\_\_ WHEN ARE YOU AVAILABLE FOR EMPLOYMENT? \_\_\_\_\_

WHICH TYPE OF EMPLOYMENT ARE YOU SEEKING?	SHIFT APPLIED FOR:
Full-time	Nights
Part-time	Weekends
Temporary or Summer	Days

After reviewing the Job Description for the position you are applying for, are you able to perform the essential job functions with or without reasonable accommodation?

YES                      NO

HAVE YOU EVER BEEN PREVIOUSLY EMPLOYED BY THE COMPANY?

YES                      NO

If you answered yes, give dates employed and reason for leaving.

Dates Employed (from) Mo. \_\_\_\_\_ Yr. \_\_\_\_\_ (to) Mo. \_\_\_\_\_ Yr. \_\_\_\_\_

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**RECORD OF EMPLOYMENT**

**Name of Current/Most Recent Employer** \_\_\_\_\_ Address (Street) \_\_\_\_\_  
(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip Code) \_\_\_\_\_ Telephone \_\_\_\_\_  
Type of Business \_\_\_\_\_ Dates Employed (from) Mo. \_\_\_\_ Yr. \_\_\_\_ (to) Mo. \_\_\_\_ Yr. \_\_\_\_  
Reason for Leaving \_\_\_\_\_  
Supervisor's Name & Title \_\_\_\_\_  
List the jobs you held & duties performed \_\_\_\_\_  
\_\_\_\_\_  
List your skills used and/or learned, \_\_\_\_\_  
\_\_\_\_\_

May we contact your current employer?    **YES**                      **NO**

Rate of Pay at: (Starting) \_\_\_\_\_ (Ending) \_\_\_\_\_

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**Name of Current/Most Recent Employer** \_\_\_\_\_ Address (Street) \_\_\_\_\_  
(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip Code) \_\_\_\_\_ Telephone \_\_\_\_\_  
Type of Business \_\_\_\_\_ Dates Employed (from) Mo. \_\_\_\_ Yr. \_\_\_\_ (to) Mo. \_\_\_\_ Yr. \_\_\_\_  
Reason for Leaving \_\_\_\_\_  
Supervisor's Name & Title \_\_\_\_\_  
List the jobs you held & duties performed \_\_\_\_\_  
\_\_\_\_\_  
List your skills used and/or learned, \_\_\_\_\_  
\_\_\_\_\_

May we contact your current employer?    **YES**                      **NO**

Rate of Pay at: (Starting) \_\_\_\_\_ (Ending) \_\_\_\_\_

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**Name of Current/Most Recent Employer** \_\_\_\_\_ Address (Street) \_\_\_\_\_  
(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip Code) \_\_\_\_\_ Telephone \_\_\_\_\_  
Type of Business \_\_\_\_\_ Dates Employed (from) Mo. \_\_\_\_ Yr. \_\_\_\_ (to) Mo. \_\_\_\_ Yr. \_\_\_\_  
Reason for Leaving \_\_\_\_\_  
Supervisor's Name & Title \_\_\_\_\_  
List the jobs you held & duties performed \_\_\_\_\_  
\_\_\_\_\_  
List your skills used and/or learned, \_\_\_\_\_  
\_\_\_\_\_

May we contact your current employer?    **YES**                      **NO**

Rate of Pay at: (Starting) \_\_\_\_\_ (Ending) \_\_\_\_\_

**RECORD OF EMPLOYMENT (CON'T)**

**Name of Current/Most Recent Employer** \_\_\_\_\_ **Address (Street)** \_\_\_\_\_

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip Code) \_\_\_\_\_ Telephone \_\_\_\_\_

Type of Business \_\_\_\_\_ Dates Employed (from) Mo. \_\_\_\_ Yr. \_\_\_\_ (to) Mo. \_\_\_\_ Yr. \_\_\_\_

Reason for Leaving \_\_\_\_\_

Supervisor's Name & Title \_\_\_\_\_

List the jobs you held & duties performed \_\_\_\_\_

List your skills used and/or learned, \_\_\_\_\_

May we contact your current employer?    **YES**                      **NO**

Rate of Pay at: (Starting) \_\_\_\_\_ (Ending) \_\_\_\_\_

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Have you ever been convicted, entered a plea of no contest or received a withheld judgment for any criminal offense (misdemeanor or felony)? (A conviction will not necessarily disqualify an applicant.)

**YES**                      **NO**

If yes, please explain: \_\_\_\_\_

Have any of your prior employers ever disciplined you including, but not limited to, a written warning, suspension, demotion, or termination of your employment? If so, please explain each incident by providing the date of occurrence, disciplinary action taken, facts surrounding the action (e.g., specific policy violation or performance issue), and the name of the employer. If you need additional space, please continue on a separate piece of paper. It is critical that the applicant be upfront in his or her response so that the Company can assess the significance of the prior action. Failure to provide full disclosure may result in disqualification from employment consideration, or if hired, termination.

Are you under 18 years of age?    **YES**                      **NO**

Are you authorized to work in the United States?    **YES**                      **NO**  
(Federal Law requires proof of identity and employment authorization for all new employees.)

For Driving Positions Only: Do you have a valid driver's license?    **YES**                      **NO**

License Number/State Issued: \_\_\_\_\_

**EDUCATION** (Last year completed)

High School School Name \_\_\_\_\_ Major Subjects \_\_\_\_\_

College School Name \_\_\_\_\_ Major Subjects \_\_\_\_\_

Other job-related education School Name \_\_\_\_\_ Major Subjects \_\_\_\_\_

If you are an experienced operator of any position-related business/plant machines or equipment, please list below along with any other job related skills: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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This Employment Application is used to notify me that the nature and scope of an investigation, if one is conducted, could include such general identification information as residence verification, and, as applicable, information concerning my employment, education, general reputation, character, and that such information may be developed through personal interviews with third parties. Only job-related information developed from such a report will be considered in evaluating my employment application or continued employment. I hereby authorize these persons, companies, organizations or corporations to answer all questions or release any information regarding the items listed in this paragraph. I hereby release them from any liability and hold them harmless from any claim for releasing any truthful information within their knowledge and/or records.

I authorize the Company to release to any person, firm, entity or organization with which I may seek employment in the future, any truthful information concerning my work experience with the Company. I hereby release and hold the Company harmless from any claim for releasing any truthful information within its knowledge and/or records.

I understand that any job offer that may be extended to me will be contingent upon the successful completion of a drug and alcohol test.

I certify that the answers given by me to the foregoing questions and during any interviews are true and correct without material omissions, and understand that, if employed, omissions and/or false statements on this application or during any interviews may result in dismissal. I understand and acknowledge that, if hired, my employment is for no definite period and either the Employer or I may terminate our relationship at will at any time, without notice or any reason, and that this employment application does not constitute an employment contract.

I have had an opportunity to have my questions about this statement's content and intent answered and understand its terms.

(To be signed in person)

\_\_\_\_\_

Date:

\_\_\_\_\_

Signature of Applicant