



**General Employment Application**

Please Print.

Date \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle Maiden

Present address \_\_\_\_\_  
Number Street City State Zip

How long at above address: \_\_\_\_\_ Social Security No. \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Telephone: Home (\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_ Work (\_\_\_\_) \_\_\_\_\_

If under 18, please list age \_\_\_\_\_

Employment desired     FULL-TIME ONLY     PART-TIME ONLY     FULL- OR PART-TIME

Do you have a valid (unexpired) drivers' license? \_\_\_\_\_

Are you a U.S. Citizen or otherwise authorized to work in the United States on an unrestricted basis?     No     Yes

What hours or shifts are you available for work? Please note both hours available and unavailable in the table below:

Availability	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Available							
Not Available							

EDUCATION				
TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	# OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME?     No     Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**GENERAL APPLICATION FOR EMPLOYMENT (CONTINUED)**

Please list two references other than relatives or previous employers.

Name \_\_\_\_\_

Name \_\_\_\_\_

Position \_\_\_\_\_

Position \_\_\_\_\_

Company \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Address \_\_\_\_\_

Telephone ( ) \_\_\_\_\_

Telephone ( ) \_\_\_\_\_

**Work Experience (in the last 5 years)**

Employer	Dates Worked	Position	Supervisor's Name	Responsibilities

**PLEASE READ CAREFULLY**

**APPLICATION FORM WAIVER**

In exchange for the consideration of my job application I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of any company, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered. I may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the recipient of this application permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release them from any liability as a result of such contact.

I further understand that my employment with the recipient of this application shall be probationary for a period of one hundred eighty (180) days, and further that at any time during the probationary period or thereafter, my employment relation with the company is terminable at will for any reason by either party.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_