

HAVE YOU EVER BEEN CONVICTED OF OR PLEADED NO CONTEST TO A FELONY? 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.

- YOUR EMPLOYMENT HISTORY -

List names of employers with present or last employer listed first.

May we contact current employers before you are offered a position?	<input type="radio"/> Yes <input type="radio"/> No
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Name of Employer:	Job Title:	Dates of Employment: From: To:	
Address:	City, State, Zip Code	Duties:	
Supervisor:	Telephone:	Reason for Leaving:	Starting pay: Ending pay:

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- REFERENCES -

- Provide Three References Who Are Not Former Employers Who We May Contact -

Name and Occupation	How do you know them, and for how long?	Phone Number

Education and Training

High School

Name	Location (City, State)	Year Graduated	Degree Earned

College/University

Name	Location (City, State)	Year Graduated	Degree Earned

Vocational School/Specialized Training

Name	Location (City, State)	Year Graduated	Degree Earned

CERTIFICATION AND RELEASE: I certify that I have read and understand the applicant note on page one of this form and that the answers given by me to the foregoing questions and the statement made by me are complete and true to the best of my knowledge and belief. I understand that any false information, omissions or misrepresentations of facts called for in this application may result in rejection of my application or discharge at any time during my employment. I authorize the company and/or its agents to contact, obtain, and verify the accuracy of information contained in this employment application, including information involving credit worthiness, credit standing, employment history, educational background and criminal background from all previous employers, educational institutions, credit reporting agencies, public agencies and references. In accordance with the Fair Credit Reporting Act, I specifically consent to the acquisition of such information and acknowledge that I have the right to obtain the consumer report directly from the consumer reporting agency. I also hereby release from liability the company and its representatives for seeking, gathering, and using such information to make employment decisions and all other person, schools, companies, organizations and/or law enforcement authorities for providing such information. Applicants who receive a conditional offer of employment at the company may be subject to a post offer drug test. Individuals who test positive for any illegal substance, who test positive for any controlled substance, which cannot be substantiated as a currently prescribed medication, or who refuse to undergo testing will be ineligible for employment. If I am employed, I acknowledge employment at the company is at-will; there is no specified length of employment and that this employment application does not constitute an agreement or contract for employment. This means that the employee and employer are free to terminate the employment relationship at any time, for any reason, with or without notice and with or without cause, so long as there is no violation of applicable federal or state law. I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days after my being hired. Failure to submit such proof within the required time shall result in immediate termination of employment. I represent and warrant that I have read and fully understand the foregoing and that I seek employment under these conditions.

Signature _____ Date _____

