application for at will employment (OPTION 3)

|  |
| --- |
|  FOR OFFICE USE ONLY |
| WorkLocation \_\_\_\_\_\_\_Position \_\_\_\_\_\_\_ | Rate \_\_\_\_\_\_\_Date \_\_\_\_\_\_\_ |

(An Equal Opportunity Employer)

|  |
| --- |
| We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, disability, genetic information, or any other legally protected status. We will give this application every consideration. However, in accepting it, the Company makes no commitment of employment to the applicant. This application will remain active for 180 days.***WE ARE AN AT WILL EMPLOYER, MEANING THAT EITHER THE EMPLOYER OR THE EMPLOYEE MAY END THE EMPLOYMENT RELATIONSHIP AT ANY TIME AND FOR ANY OR NO REASON.*** |

 **BASIC INFORMATION: Please print in ink.**

|  |  |
| --- | --- |
|  **Position Applied for:** |  **Date of Application:** |
|  **How Did You Learn About Us?** 🞏 Advertisement 🞏 Friend 🞏 Walk-In 🞏 Employment Agency 🞏 Relative 🞏 Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
|  Last Name First Name Middle Name |
|  Address City State Zip Code |
|  Telephone Number(s) |  Social Security Number |
|  |  |  |  |

Salary requirements: Date Available:

Are you a United States Citizen? 🞏 Yes 🞏 No

 *If no, are you lawfully authorized to work in the United States?* 🞏 *Yes* 🞏 *No*

**\*WE ARE AN AT WILL, EQUAL OPPORTUNITY EMPLOYER\***

**EMPLOYMENT HISTORY:** Start with your present or most recent job. Include any job related military service assignments, self-employment, and summer and part time jobs.

|  |  |  |  |
| --- | --- | --- | --- |
|  1 |  Company |  Address |  Telephone |
|  |  |  |
|  Dates From To Employed |  Supervisor |
|  Your Duties: |
|  Reason for Leaving: |
|  2 |  Company |  Address |  Telephone |
|  |  |  |
|  Dates From To Employed |  Supervisor |
|  Your Duties: |
|  Reason for Leaving: |
|  3 |  Company |  Address |  Telephone |
|  |  |  |
|  Dates From To Employed |  Supervisor |
|  Your Duties: |
|  Reason for Leaving: |
|  4 |  Company |  Address |  Telephone |
|  |  |  |
|  Date From To Employed |  Supervisor |
|  Your Duties: |
|  Reason for Leaving: |

If presently employed, why do you desire to change your position?

If you are now employed, may we contact your present employer? 🞏 Yes 🞏 No

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**REFERENCES:** (not former employers or relatives)

|  |  |  |
| --- | --- | --- |
|  Name |  Address |  Phone Number |
|  |  |  |
|  |  |  |
|  |  |  |

**EDUCATION:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  **School** |  **Name and** **Address** **of School** |  **Course of** **Study** |  **Circle Last** **Year** **Completed** |  **Did You** **Graduate?** |  **List** **Diploma** **or Degree** |
|  High |   |   |  1 2 3 4  | 🞏 Yes🞏 No |  |
|  College |  |  |  1 2 3 4  | 🞏 Yes🞏 No |  |
|  Other (Specify) |  |  |  1 2 3 4  | 🞏 Yes🞏 No |  |

If you did not graduate, why did you leave school or college?

Are you planning to pursue further studies? 🞏Yes 🞏 No

 If Yes, 🞏 Day or 🞏 Night School

If so, when, where, and what courses?

**INTERESTS:** Use this space below to describe interest in the industry and skills and aptitudes that you feel qualify you for a position with our Company. (You may wish to include civic and community activities, professional societies in which you participate, hobbies, sports, special training, or skills such as typing, accounting, and the like.) If you need more space, please continue on a separate sheet.

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**ACKNOWLEDGMENT**

*Please Read Before Signing:*

The facts set forth in my application for employment are true and complete. I understand that if employed, false or misleading statements on this application shall be considered cause for immediate dismissal. In making this application for employment I authorize you to make and/or investigate a report whereby information is obtained through personal interviews with my neighbors, friends or others with whom I am acquainted. This inquiry, if made, may include information as to my character, general reputation, personal characteristics and mode of living. This inquiry, if made, also may include information concerning any and all employment discrimination claims and/or accusations brought against me, including, but not limited to, charges and/or accusations brought against me that relate to harassment and/or discrimination involving race, sex, age, religion, disability and/or national origin.

I understand that I have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of any such investigation or report that is made.

***I understand that, if the Company employs me, EITHER THE Company or I can terminate my employment with or without cause at any time and for any or no reason. I also understand that no official of the Company other than the Chief Executive Officer has any authority to enter into an agreement for employment for any specific period of time or to make any agreement contrary to the foregoing.***

Signature of Applicant Date

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