

# Application for Employment



## Position Applying For:

<b>Last Name</b>	<b>First Name</b>	<b>Middle Name</b>	<b>Date of Application</b>
<b>Address:</b>			
<b>Email:</b>		<b>Phone:</b>	

Are you legally eligible for employment in the United States?  **Yes**  **No**

*Proof of citizenship or immigration status will be required upon employment*

Are you at least 18 years of age?  **Yes**  **No**

Were you referred by a current employee?  **Yes**  **No**

If yes, please state name: \_\_\_\_\_

Are you available to work:  **Over time**  **Rotating Shifts**  **Swing Shift**  
 (Check all that apply)  **First Shift**  **Second Shift**  **Third Shift**

Have you ever pleaded guilty, pleaded no contest, or been convicted of criminal offenses? <input type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>
If yes; please specify the month and year of the action. _____
<i>A criminal record does not constitute an automatic bar to employment. We will consider the crime only as it relates to the job in question. One of our facilities is under federal regulations that restrict prohibited persons.</i>

## Employment History

Start with your present or last job and include the last 7 years of employment history. If additional space in needed, please continue on another sheet of paper. Include any job-related military service assignments and volunteer activities if applicable. (You may exclude organizations which indicate, sex, race, religion, national origin, ancestry, handicap, or any protected status.)

<b>Employer</b>	<b>Start Date</b>	<b>End Date</b>	<b>Job Title</b>
<b>City, State</b>	<b>Phone Number</b>	<b>Reason for Leaving</b>	
<b>Work Performed</b>			

<b>Employer</b>	<b>Start Date</b>	<b>End Date</b>	<b>Job Title</b>
<b>City, State</b>	<b>Phone Number</b>	<b>Reason for Leaving</b>	
<b>Work Performed</b>			

# Employment Agreement



Directions: Please read each paragraph and initial on the lines. When completed, sign and date and the bottom.

I certify that answers given in this application are true and complete to the best of my knowledge.

\_\_\_\_\_  
Initial

This company maintains a strong workplace drug policy and I understand that should I receive a conditional offer of employment, I will be required to consent to a drug screen, which tests for the presence of illegal substances. This drug screen is paid for by the company.

\_\_\_\_\_  
Initial

I also understand that should I receive a conditional offer of employment, I will be required to undergo a medical examination, to assist the company in evaluating my ability to work safely and effectively. This medical examination is paid for by the company.

\_\_\_\_\_  
Initial

I understand that consideration for employment may be contingent upon the results of a reference and background check. I authorize this company to investigate all statements made on my application for employment, and to discuss the results of its investigations with those responsible for hiring. I further authorize the company to contact my former employer(s) and any listed references or other persons who can verify information, and I give my consent for former employer(s) and other contacted persons to respond to questions pertaining to information on this application. Further, I release from liability such former employer(s) or other persons contacted by and providing information to the company.

\_\_\_\_\_  
Initial

I understand that nothing in this application is intended to imply or create an employment relationship or contract for employment. I further understand that if hired, my employment is at-will and can be terminated by the company or me at any time, with or without notice, for any reason. I also understand that while personnel policies, programs, and procedures may change from time to time, at-will employment status is not subject to change, unless there is a written agreement signed by the company's president.

\_\_\_\_\_  
Initial

I acknowledge that any information I supply, which the company may or may not use to make an evaluation of my suitability for employment, is correct to the best of my knowledge. I also understand that any deliberate falsifications, misrepresentations, or omissions of fact may be grounds for rejection of my application or dismissal from subsequent employment.

\_\_\_\_\_  
Initial

I hereby certify that I have read and understand the above information.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_