

APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, handicap or national origin.

PERSONAL INFORMATION

Date _____

Name _____

Last

First

Middle

Present Address _____

Street

City

State

Zip

Permanent Address _____

Street

City

State

Zip

Phone No. _____

(enter numbers only, no spaces or punctuation)

Referred

By _____

Are you 18 years of age or older?

Yes

No

EMPLOYMENT DESIRED

Position _____

Date You
Can Start

Salary
Desired

Are You Employed Now? Yes No

If So May We Contact
Your Present Employer?

Yes No

Ever Applied to this Company Before? Yes No

Where?

When?

EDUCATION

Name and Location of School

Select
Last Year
Completed

Did You
Graduate?

Subjects Studied and
Degree(s) Received

High School

1 2 3 4

Yes
No

College

1 2 3 4

Yes
No

Trade, Graduate, Business
or Correspondence
School

1 2 3 4

Yes
No

GENERAL

Subjects of Special Study or Research Work _____

Job Related Skills (computer, driver's license certifications, etc.) _____

EMPLOYMENT HISTORY

List below your last four employers, starting with the last one first.

| Date Month and Year | Name and Address of Employer | Phone Number | Supervisor | Salary (upon leaving) | Position | Reason for Leaving |
|------------------------|------------------------------|-----------------|------------|--------------------------|----------|--------------------|
| From | | | | | | |
| To | | | | | | |
| From | | | | | | |
| To | | | | | | |
| From | | | | | | |
| To | | | | | | |
| From | | | | | | |
| To | | | | | | |

REFERENCES

List below three persons not related to you, whom you have known at least one year.

| Name | Address | Phone Number | Position | Years Acquainted |
|------|---------|-----------------|----------|---------------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |

If you are to be hired by the company, you will be required to attest to your identity and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements.

AUTHORIZATION

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by the Company.

I understand that any employment is conditioned on a background check. I authorize the Company to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation to the Company, without giving me prior notice of such disclosure. In addition, I release the Company, any former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.

I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or the Company. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Company unless made in writing by an authorized Company representative.

If I am offered employment I agree to submit to a medical examination and drug test, if required, before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the Company and as permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclose to the Company the results of the examination, which results shall remain confidential and segregated from my personnel file. I understand that my employment or continued employment to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test, if required, and if I am hired a condition of my employment will be that I abide by the Company's Drug and Alcohol Policy.

I understand that acceptance of this form does not indicate there is a position open and does not obligate the Company to hire. If hired, I agree to abide by all Company work rules, policies and procedures. The Company retains the right to revise its policies or procedures, in whole or in part, at any time.

Date

Signature