

Employment Application



Position Desired: _____

Salary Desired: \$ _____

Schedule Desired: Full Time Part Time
 Temporary / Seasonal

Date Available: _____ / _____ / _____

PERSONAL INFORMATION

Last Name		First Name		Middle Name	Are you authorized for employment in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No
Street Address			City	State	Zip
Home Phone Number (including area code)		Cell Phone Number (including area code)		Email Address	Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No

REFERRAL

How were you referred to our company? <input type="checkbox"/> Ad <input type="checkbox"/> Website <input type="checkbox"/> Walk-in <input type="checkbox"/> Company Employee <input type="checkbox"/> Other	If referred by a company employee, please list his/her name: _____
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EDUCATION

Type of School	Name and Location of School	Degree/Area of Study	# of Years Attended	Graduated (Check One)
HIGH SCHOOL	Name			Yes No
	City State			<input type="checkbox"/> <input type="checkbox"/>
COLLEGE	Name			Yes No
	City State			<input type="checkbox"/> <input type="checkbox"/>
OTHER	Name			Yes No
	City State			<input type="checkbox"/> <input type="checkbox"/>

EMPLOYMENT HISTORY

Please print and list all prior employers, beginning with your PRESENT or MOST RECENT employer. Please attach additional sheets to this application if necessary. Complete all requested information in full. DO NOT include overtime, bonus, commissions, etc. in the base salary information. Please include as part of your employment history any verified work performed on a volunteer basis and/or work performed while in the military.

Dates	Name and Address of Employer	Position and Supervisor	List Major Duties	Base Salary	Reason for Leaving
From: ____ / ____ Mo. Yr.	Name	Your Job Title		Starting	
	Address			Final	
To: ____ / ____ Mo. Yr.	Phone	Supervisor			
From: ____ / ____ Mo. Yr.	Name	Your Job Title		Starting	
	Address			Final	
To: ____ / ____ Mo. Yr.	Phone	Supervisor			
From: ____ / ____ Mo. Yr.	Name	Your Job Title		Starting	
	Address			Final	
To: ____ / ____ Mo. Yr.	Phone	Supervisor			
From: ____ / ____ Mo. Yr.	Name	Your Job Title		Starting	
	Address			Final	
To: ____ / ____ Mo. Yr.	Phone	Supervisor			

Is there any reason why we should not contact any current or former employer for a reference? Yes ____ No ____? If yes,

AVAILABILITY

It is not necessary for you to identify unavailability for work because of religious observance or practice or any other protected classification. Subsequent to any job offer, we will consider whether a reasonable accommodation can be made.

	SUN	MON	TUE	WED	THU	FRI	SAT
AM							
PM							

Have you ever been convicted of a crime that has not been expunged, sealed, pardoned, annulled, discharged, statutorily eradicated or dismissed upon condition of probation? Yes _____ No _____. If yes when? A criminal conviction will not necessarily be a bar to employment. To help us evaluate your application, please describe the nature of the offense for which you were convicted, the circumstances surrounding the commission of the offense and your subsequent rehabilitation:

APPLICANTS IN THE STATE OF CALIFORNIA ONLY

You may answer "No Record" with respect to any conviction for a marijuana offense if the conviction occurred more than two years prior to the date this application is completed. In addition, do not provide any information regarding a referral to and participation in any pre-trial or post-trial diversion program.

APPLICANTS IN THE STATE OF CONNECTICUT ONLY

You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased Connecticut General Statutes Sections 46b-146, 54-76o or 54-142a. Criminal records subject to erasure pursuant to Connecticut General Statutes Sections 46b-146, 54-76o or 54-142a are records related to (a) determinations of "delinquency" or that, as a child, you were a member of a family with severe needs, (b) a ruling you are a "youthful offender", (c) a finding you are not guilty for a criminal charge, or (d) a conviction for which you have received an "absolute pardon". Any person whose criminal records have been erased pursuant to Connecticut General Statutes Sections 46b-146, 54-76o or 54-142a shall be deemed to never have been arrested within the meaning of the general statutes with respect to the proceedings so erased and may so swear under oath.

APPLICANTS IN THE STATE OF ILLINOIS ONLY

Please exclude all sealed and expunged convictions, including sealed and expunged juvenile convictions.

APPLICANTS IN THE STATE OF MARYLAND ONLY

MARYLAND LIE DETECTOR LAW - "Under Maryland law, an employer may not require or demand, as a condition of employment, prospective employment, or continued employment, that an individual submit to or take a lie detector or similar test. Any employer who violates this provision is guilty of a misdemeanor and subject to a fine not exceeding \$100."

APPLICANTS IN THE STATE OF MASSACHUSETTS ONLY

If you have a sealed record on file with the commissioner of probation you may answer "No Record" with respect to any inquiry herein relative to prior arrests, criminal court appearances or convictions. You may answer "No Record" with respect to any inquiry relative to prior arrests, court appearances and adjustments in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court for criminal prosecution. In addition, you may answer "No Record" with respect to a first conviction for: (1) the following misdemeanors" drunkenness, simple assault, speeding, minor traffic violation, affray or disturbances of the peace; or (2) any misdemeanor conviction where the date of conviction or any resulting incarceration occurred five or more years ago.

APPLICANTS IN THE STATE OF MASSACHUSETTS ONLY

MASSACHUSETTS LIE DETECTOR LAW - "It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalty and civil liability.

Applicant's Signature

Date

APPLICANTS IN THE STATE OF PENNSYLVANIA ONLY

You may answer "No Record" with respect to any conviction for a misdemeanor or summary offense.

APPLICANTS IN THE STATE OF RHODE ISLAND ONLY

We are subject to the workers' compensation laws of the state of Rhode Island.

PLEASE READ THIS STATEMENT CAREFULLY

I have read and fully understand the questions asked in this application. I certify that all of the answers I have given are true, accurate and complete. I understand that the omission and/or misrepresentation of any fact from or on this application or during any interview may result in immediate rejection of my application or if I am hired may be cause for immediate dismissal. Unless I noted otherwise, I authorize the Company to contact all my employment references and personal references, as well as the education institutions I have attended. I further authorize the Company to inquire about, investigate and obtain copies of any records which relate to me from my former employers and educational institutions. I hereby release the Company and all affiliated persons and entities, as well as any person or institution that provides the Company with any lawful information about me, from any and all liability whatsoever resulting from any such lawful inquiry, investigation or communication.

If hired, I agree to abide by all of the rules and regulations of the Company. I understand and agree that nothing in this application shall constitute an offer, a contract or a guarantee of employment for a specific period of time. If hired, I understand that my employment may be terminated with or without cause and with or without notice at any time, at the will of the Company or me. I further understand that no representative or agent of the Company, other than the Vice President, Human Resources, has the authority to enter into any agreement for employment for any specific period of time, or to make an agreement contrary to the foregoing. I also understand that any agreement modifying my at-will employment status must be in writing and signed by the Vice President, Human Resources. In addition, I understand that the Company and all plan administrators shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance or otherwise change all policies, procedures, benefits or other terms and conditions of employment.

I understand that any hiring decision is contingent upon my successful completion of all of the Company's lawful pre-employment checks, which may include a background check. I agree to execute any consent forms necessary for the Company to conduct its lawful pre-employment checks.

I have read and affirm as my own the above statements

Applicant's Signature

Date

We are an Equal Opportunity Employer. All persons shall have the opportunity to be considered for employment without regard to their race, color, religion, national origin, ancestry, alienage or citizenship status, age, disability or handicap, sex or gender, veteran status, or any other characteristics protected by applicable federal, state or local laws.

We will endeavor to make a reasonable accommodation to the known physical or mental limitations of a qualified applicant with a disability unless the accommodation would impose an undue hardship on the operation of our business. If you believe you require such assistance to complete this form or to participate in an interview, please let us know.