



APPLICATION FOR EMPLOYMENT

IMPORTANT: Read Terms of Employment carefully. Print or type answers to every question. All information on this application will be treated confidentially. FEDERAL AND STATE LAWS PROHIBIT DISCRIMINATION FOR VARIOUS REASONS, INCLUDING RACE, COLOR, RELIGION, CREED, NATIONAL ORIGIN, AGE, SEX, OR DISABILITY.

PERSONAL INFORMATION

Last Name _____ First Name _____ Middle Initial _____ Date _____

Address (Street & Number No P.O. Boxes) _____ Telephone () _____

(City, State, and Zip Code) _____ Cellular Phone () _____

For How Long? _____

Previous Address (Street & Number) _____ Telephone () _____

(City, State, & Zip Code) _____ For How Long? _____

Social Security Number _____ Date of Birth: (MM/DD/YY) _____

IN CASE OF EMERGENCY PLEASE NOTIFY: Name: _____

Address: _____ Telephone () _____

HAVE YOU EVER BEEN CONVICTED OF VIOLATING ANY LAW (EXCEPT MINOR TRAFFIC VIOLATIONS)? ___ Yes ___ No
 If yes, please attach summary of details. Disclosure of a criminal record does not automatically disqualify you from employment consideration.
 Your case will be judged on its own merits. May we have your permission to conduct a criminal background check? ___ Yes ___ No

Do you have a valid driver's license? ___ Yes ___ No Type _____ State _____ Expiration Date _____

EDUCATION

Schools Attended	Name and Address of School	From Mo./Yr.*	To Mo./Yr.*	Graduated (Yes or No)	Degree or Type of Diploma
High School					
College or University					
College or University					
Business or Technical					

WORK INTEREST

Position Applied For::	Minimum Salary: _____ per hour	Type of Employment Desired: ___ Full Time ___ Part Time ___ Temporary	Earliest Available Date: --
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Do you have the legal right to work in the United States? ___ Yes ___ No

Are you willing to work on Saturdays? _____
DO YOU HAVE ANY OBJECTIONS TO A PRE-EMPLOYMENT DRUG SCREEN, TESTING FOR THE PRESCENCE OF AN ILLEGAL SUBSTANCE, AND THE PRESCENCE OF CONTROLLED PRESCRIPTION DRUGS FOR WHICH A VALID PRESCRIPTION WILL BE REQUIRED? ___Yes ___No
Briefly state the reasons you are interested in employment with the Company:

EMPLOYMENT HISTORY

List all previous work experience and periods of unemployment. Begin with your present position and work back to your first position. Attach resume, if necessary. If there were periods of more than one month where you were self-employed or unemployed, list name and address of person(s) who can verify your activities during this period(s).

From Mo./Yr.	To Mo./Yr.	Employer, Address, and Telephone Number	Salary	Job Title/Description of Work Performed	Reason for Leaving

MILITARY SERVICE

Branch*	Grade or Rank*	Nature of duty or training*	Induction Date*	Separation Date*
Present Service Classification*			Type of Discharge or Separation*	

TERMS OF EMPLOYMENT

I, the undersigned, state that all information given by me in this application is true to the best of my knowledge. I authorize the Company to verify such information and to contact any reference given by me. Should I be employed by the Company, I agree that:

- My employment shall be in accordance with the terms of this application and the Company rules and regulations, which may be modified at any time by the Company.
- I understand that my employment may be terminated or I may resign at any time, with or without notice, with or without cause, the Company's only obligation being to pay me wages or salary earned by me to date of termination. I further acknowledge and agree that the period of my employment is indefinite and that no documents of the Company shall constitute a contract of employment. The policy set forth in this paragraph may be modified only by written agreement signed by me and by an officer of the Company.
- I agree that employment may be contingent upon meeting all placement considerations, including medical ones.
- All right, title, and interest, including, without limitation, all copyrights and patents, in and to any material produced or inventions developed by me which affect or relate to the Company's business or affect or relate to the Company's industry shall vest in the Company and I shall have no personal right, title, or interest whatsoever therein.
- The Company, and any person or concern it may authorize, shall be entitled, without further consent, to copyright, sell, or use in any manner, any picture or photograph of me.
- The Company shall have the right at any time after the termination of my employment to furnish to others information concerning my employment record, work habits, and work performance with the Company, including the information contained in this application, or copies of any information which is maintained in my personnel file. I specifically release the Company, its officers, directors, agents, and employees from any and all liability regarding the release of any information described in this paragraph.
- I agree not to disclose any of the Company's trade secrets or other confidential or restricted information and not to make use of such trade secrets or confidential or restricted information in any fashion during employment or after my employment with the Company is terminated.
- I authorize the Company to investigate all statements contained in this application and hereby release former employers and the Company from any and all liability on account of furnishing such information to the Company.

FALSIFICATION, MISREPRESENTATION, OR OMISSION OF INFORMATION ON THIS, OR ON ANY OTHER EMPLOYMENT FORM, SHALL BE GROUNDS FOR IMMEDIATE TERMINATION, REGARDLESS OF WHEN SUCH FALSIFICATION, MISREPRESENTATION, OR OMISSION IS DISCOVERED.

Signature of Applicant

Date