# **Application For Employment**

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

#### (Please Print)

		I		
Position(s) Applied For		Date of Application		
How Did You Learn About Us?		•		
Advertisement	Friend	_ Walk-In _		
Employment Agency	Relative	Other		
	TCIALIVC			
Last Name	First Name	Middle Name		
Address Number Street	City	State Zip Code		
Telephone Number(s)				
If you are under 18 years of age, or		Voo	No	
required proof of your eligibility to	work?	Yes	No	
Have you ever filed an application	with us before?	Yes	No	
		If Yes, give date		
Have you ever been employed wit	h us before?	Yes	No	
		If Yes, give date		
Are you surrently employed?		Vac	No	
Are you currently employed?		Yes	No	
May we contact your present emp	loyer?	Yes	No	
Are you prevented from lawfully be	ecoming employed in			
this country because of Visa or Im		Yes	No	
Proof of citizenship or immigration state	us will be required upon employment			
On what date would you be availa	ble for work?			
Are you available to work:	Full TimePart Time	Temporary_		
Are you currently on "lay-off" staus	s and subject to recall?	Yes	No	
Can you travel if a job requires it?		Yes	No	

### Education

	Elementary School	High School	Undergraduate College/University	Graduate / Professional
School Name and Location				
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma / Degree		0 10 11 12		
Describe Course of Stu	ıdy			
Describe any specialize training, apprenticeshi and extra-curricular ac	p, skills			
Describe any honors you have received				
State any additional information you feel mathemation you feel mathematical to us in consider your application				
Ir	ndicate any foreign la	nguages you can spe	eak, read and / or wri	te
	Fluent	Good		Fair
Speak				
Read				
Write				
or other protected status		sex, race, religion, nationa	I origin, age, ancestry, or I	nandicap
References				
Give name, address, and to	elephone number of three ref	ferences who are not related	to you and are not previous	employers.
1				
2				
3				
Have you ever had an	y job-related training in	the United States milita	ary? Yes	No
If Yes, please describe	<u> </u>			
Are you physically or c	otherwise unable to per	form the duties of the jo	ob for which you are ap Yes	plying? No

### **Employment Experience**

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

Employer		Dates 5	mployed	Work Performed	
		From	To		
Address		110111	10	Work Chomica	
Telephone Number(	s)				
Job Title	Supervisor				
Reason for Leaving					
Employer		Dates E From	Employed To	Work Performed	
Address					
Telephone Number(	s)				
Job Title	Supervisor				
Reason for Leaving	•				
Employer		Dates E	mployed		
		From	То	Work Performed	
Address					
Telephone Number(	s)				
Job Title	Supervisor				
Reason for Leaving					
Employer		Dates E	mployed		
		From	То	Work Performed	
Address					
Telephone Number(	s)				
Job Title	Supervisor				
Reason for Leaving	<b>'</b>		-		
	If you need additional spa	ce, please continue on	a separate s	heet of paper.	
Snecial Skills	and Qualifications	, <b>,</b>	·		
	cial job-related skills and qua	_ lifications acquired fron	n emplovmer	nt or other experience.	
	,			o. o. o. p o. o. o.	

## **Applicant's Statement**

I certify that answers given herein are	true and complete	e to the best	of my knowledge.	
I authorize investigation of all statemer necessary in arriving at an employmer		nis applicatio	on for employment a	s may be
This application for employment shall the Any applicant wishing to be considered as to whether or not applications are be	d for employment	beyond this		
I hereby acknowledge that any employ nature, which means that the Employe Employee at any time with or without or relationship may not be changed by an specifically acknowledged in writing by	e may resign at a cause. It is further ny written docume	iny time and r understood ent or by con	the Employer may of this "at will" employ duct unless such ch	discharge /ment
In the event of employment, I understa or interview(s) may result in discharge and regulations of the employer.				
Signature of Ap	plicant		Date	
For	Personnel De	epartment	Use Only	
Arrange Interview Yes		_	No	
Remarks				
	Interviewe	er		Date
Employed Yes	No	_		
			Date of Employme	nt
Job Title		Hourly Rat	te/Salary	
Dep't		Ву	Name 9 Title	Data
Dep't		Ву	Name & Title	Date
Dep't		Ву	Name & Title	Date
		Ву	Name & Title	Date
		Ву	Name & Title	Date