## **APPLICATION FOR EMPLOYMENT**



PERSONAL INFORMATION					
Name		First	······································	Date _	
Last		First	Mid	dle Initial	
Phone		E-Mail	1-1		
Present Address	Ctroot	City	State	Zip	
	Sueei	City	State	∠ıµ	
Permanent Address _					
Permanent Address _	Street	City	State	Zip	
EMPLOYMENT DESI	RED				
,			<b>5</b> .		
Position Desired			Date yo	u can start	
0 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	<b>6</b> (1)				
Qualifications you have for the position.					
PAST EMPLOYMENT EXPERIENCE – Applicant please note that your references will be verified.					
By signing this application form you will authorize this Company to acquire such verification.					
List last three Employers beginning with the most recent – PLEASE PRINT					
#1				()	
Business/Reference	Name	Address: Street	City St	ate Zip Phone	
Position	Rate	Hire Date	Term. Date	eReason	
			<del></del> -		
#2				()	
Business/Reference	e Name	Address: Street	City St	ate Zip Phone	
Position	Rate	Hire Date	Term. Date	eReason_	
#3				( )	
#3 Business/Reference Name		Address: Street	City St	ate Zip Phone	
Position	Rate	Hire Date	Term Date	e Reason	
1 6511.511					

at least one year. Give 1 2	CES: Give 3 names of persons not related to you who have known you for Name, Address (including zip code) and Phone. PLEASE PRINT
Other Information you	would like us to know, if any
shifts or days off can be given	uss or list any preferences or special needs with your interviewer. There is no guarantee that
	Hours per week desired
Special Needs, if any, you wi	
	dress Relationship
POLICY STATEMENTS	
creed, color, age, martial status condition of employment. Impo and work quality. This Compan POLICY ON HIRING: It is the punited States. All employees wheir date of hire. Should the dot terminate the employee. AT WILL EMPLOYMENT: it is terminated with or without cause representative of the Company any agreement for employment the Employee Manual is to be a CERTIFICATION: I hereby center of my knowledge. I understand disqualification from further con APPLICANTS PLEASE TAKE Mand/or position. Although disco "adjustment period." AUTHORIZATION: I hereby authereby authorize any of my form hold any employer or person(s) AGREEMENT: I am aware that employment. I understand that employment and compensation Company" or my option. In this	e policy of this Company that an applicant's religion, sex, sexual orientation, national origin, race, handicap or veteran's status will not influence hiring, promotion, pay, benefits or any other term or ant factors considered for hiring or potential advancement are attitude, ability, aptitude, motivation, promotes equal opportunity.  licy of this Company to hire only American citizens and Aliens who are authorized to work in the libe required to provide original documents that establish this authorization within three days of ruments not be provided within that period of time, the Company has no choice, under the law, but be policy of this Company that employment and compensation of any employee is at will and can be at any time, at the option of the employee or at the option of the Company. No employee or there than by consensus of three out of four of the management team has any authority to enter into ontrary to the foregoing and then only if in a written, signed document. Neither this application nor neidered a contract of employment.  In you that the facts set forth in the foregoing employment application are true and complete to the best had falsified statements on this application, in any detail, shall be considered sufficient cause for deration for hire or dismissal, whenever found.  DTICE: Employees are entitled to certain Employee discounts based on hours worked per week not benefits will commence upon first day of employment, all employees must complete a 90-day norize this Company to investigate and to inquire into my employment/educational background. If the employers to release information about my character and employment relationship. I agree to armless for releasing information regarding my employment, education and character.  The Company has conditions of employment and policies to which I will be subject if selected for my employment is "At Will". I understand that, unless otherwise specifically agreed to in writing, my an be terminated with or without cause, and with or without notice, at
Signature of Applicant	Print Name
Date	Reviewed by