

APPLICATION FOR EMPLOYMENT

abc Seamless Siding Store

Equal access to programs, services and employment is available to all persons. Those applicants requiring accommodations to the application and/or interview process should contact a representative of the Personnel Department.

PLEASE PRINT

Position(s) applied for _____ Date of application ____/____/____

Referral Source Advertisement Employee Relative Government Employment agency
 Walk -in Private Employment Agency Other _____

Name of Source (if applicable) _____

Name _____
Last First Middle

Address _____
Street City State Zip Code

Telephone Number (____) _____ Social Security Number _____ - _____ - _____

If necessary, best time to call you is _____ : _____ am/pm

May we contact you at work? Yes No

If yes, work number and time to call _____ (____) _____ : _____ am/pm

If you are under the age of 18 can you provide a work permit? Yes No

Have you filled out an application here before? Yes No

If yes, give date _____ / _____ / _____

Have you ever been employed here before Yes No

If yes, give dates _____ From ____/____/____ to ____/____/____

Are you legally eligible for employment in this country? Yes No

(Proof of U.S. Citizenship or immigration status will be required upon employment.)

Date available for work _____ / _____ / _____

Type of employment desired Full-Time Part-Time Temporary Seasonal

Are you on lay-off and subject to recall? Yes No

Will you relocate if the job requires it? Yes No Will you travel if job requires it? Yes No

Are you able to meet the attendance requirements of the position? Yes No

Will you work overtime if required? Yes No

Have you ever been bonded Yes No

Have you ever been convicted of a felony in the last seven (7) years? Yes No

(Such conviction may be relevant if job related, but does not bar you from employment.)

If yes, please explain _____

Driver's License number (if job related) _____ Issuing State _____

AN EQUAL OPPORTUNITY EMPLOYER

Employment History

Employer	Telephone	Dates Employed		Summarize the nature of the work performed and job responsibilities
		From	To	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	Per	
Reason for leaving		Hourly Rate/Salary		
		Final		
		\$	Per	
May we contact for reference Yes No Later				
Employer	Telephone	Dates Employed		Summarize the nature of the work performed and job responsibilities
		From	To	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	Per	
Reason for leaving		Hourly Rate/Salary		
		Final		
		\$	Per	
May we contact for reference Yes No Later				
Employer	Telephone	Dates Employed		Summarize the nature of the work performed and job responsibilities
		From	To	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	Per	
Reason for leaving		Hourly Rate/Salary		
		Final		
		\$	Per	
May we contact for reference Yes No Later				
Employer	Telephone	Dates Employed		Summarize the nature of the work performed and job responsibilities
		From	To	
Address				
Job Title		Hourly Rate/Salary		
		Starting		
Immediate Supervisor and Title		\$	Per	
Reason for leaving		Hourly Rate/Salary		
		Final		
		\$	Per	
May we contact for reference Yes No Later				

Comments (including excluding explanation of any gaps in employment) _____

Skills and Qualifications – Summarize any special training, skills, licenses, certificates and/or characteristics of yourself that may qualify you as being able to perform job-related functions for the position which you are applying _____

AN EQUAL OPPORTUNITY EMPLOYER

Educational Background (if job related)

A. List last three (3) schools attended, starting with most recent. B. List number of years completed. C. Indicate degree or diploma earned if any. D. Grade Point Average or Class Rank and E. Major and minor field of study (if applicable).

School	Years Completed	Degree Diploma	GPA Class Rank	Major	Minor

List any foreign language(s) you know and check the boxes that describe your skill level.

Language	Speak Some	Speak Fluently	Read	Write

References

List name and telephone number of three business/work references who are *not* related to you and are not previous supervisors. If not applicable, list three school or personal references who are *not* related to you.

Name	Phone Number	Years known

List special accomplishments, publications, awards (exclude information that would reveal sex, race, religion, national origin, age, color, disability or other protected status.)

List any additional information you would like us to consider.

It is understood and agreed up that any misrepresentation by me on this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed.

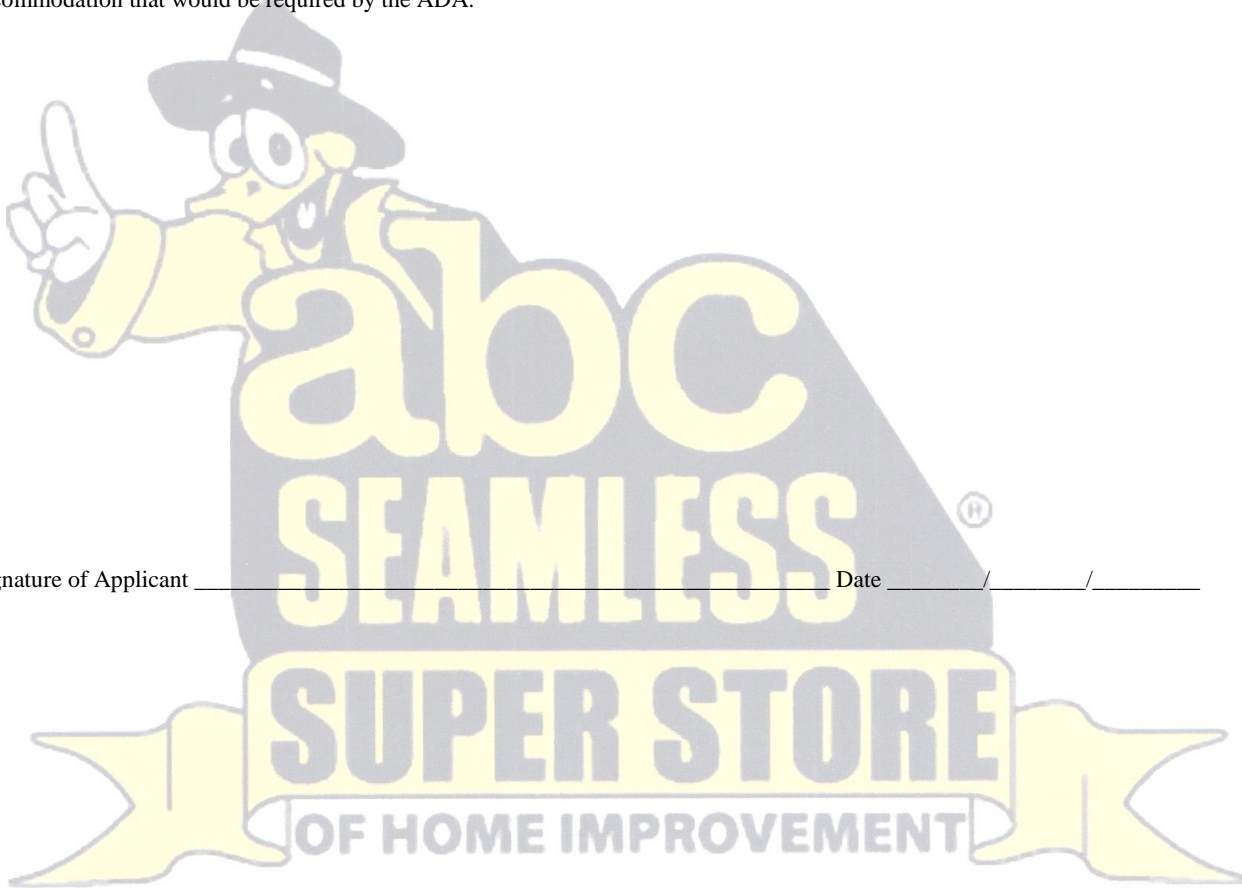
I give the employer the right to investigate all references and to secure additional information about me, if job-related. I hereby release from liability the employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The employer is an Equal Opportunity Employer. The employer does not discriminate in employment and no questions on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state or federal law.

This application is current for only sixty (60) days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

I understand that just as I am free to resign at any time, the employer reserves the right to terminate my employment at any time, with or without cause, and without prior notice. I understand that no representative of the employer has the authority to make any assurances to the contrary.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of this person's need for and accommodation that would be required by the ADA.



Signature of Applicant _____ Date ____/____/____