



Application for Employment

We are an Equal Opportunity Employer

Personal Information

Name: _____ Date: _____ Ph# _____

Address: _____

Street Apt# City State Zip

What location are you applying for? Strasburg Broomfield Westminster

How did you hear about us? _____

Employment Desired

Position _____ Date you can begin Employment _____

Salary Desired _____ Are you currently Employed? _____

May we contact your current Employer? Yes No Past Employer? Yes No

Are you Legally Authorized to work in the U.S.? Yes No

Have you ever applied for this company before? Yes No How long ago? _____

Have you ever been convicted of a felony that relates to the position you are applying for in the last 10 years? _____

If yes, state details and dates: _____

(A "YES" answer does not exclude you from consideration of employment)

Availability

Circle the days and shifts you are available to work

| | | | | | | |
|-------|-------|-------|-------|-------|-------|-------|
| Mon | Tue | Wed | Thu | Fri | Sat | Sun |
| AM PM | AM PM | AM PM | AM PM | AM PM | AM PM | AM PM |

Education and Training

| | Name & Location of School | Yrs Completed | Did you Graduate? | Subject Studied |
|---------------------|---------------------------|---------------|-------------------|-----------------|
| High School | _____ | _____ | _____ | _____ |
| College | _____ | _____ | _____ | _____ |
| Additional Training | _____ | _____ | _____ | _____ |

Work Experience

| Dates Employed | Name of Supervisor & Phone # Or Name & Address of Former Employer | Salary | Position | Reason for Leaving |
|------------------------|---|--------|----------|--------------------|
| From _____ To _____ | _____ | _____ | _____ | _____ |
| From _____ To _____ | _____ | _____ | _____ | _____ |
| From _____ To _____ | _____ | _____ | _____ | _____ |

References

List below the names of at least three persons not related to you, whom you have known at least one year

| Name | Phone Number | Profession | Years Acquainted |
|-------|--------------|------------|------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Authorization

"I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also agree that any falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date. I authorize a thorough investigation of my past employment and activities, agree to cooperate in such investigation, and release from all liability or responsibility all persons and corporations requesting or supplying information. I further authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the job for which I am being considered or any future job in the event I am hired. I hereby agree to submit to any lawful drug, polygraph, integrity, or skill testing that may be required as a condition of employment or continued employment and understand that unless otherwise prohibited by law, refusal to submit to such testing during the course of my employment may result in disciplinary action, up to, and including discharge. I further agree to submit to search of my person or work area that may be assigned to me and I hereby waive all claims for damages on account of such examination."

"I understand that my employment is terminable-at-will, and that this application is not, and is not intended to be, a contract for continued employment."

Signature: _____ Date: _____

Do Not Write Below This Line

Interview Remarks

1st Interview Scheduled on: _____ at _____

Interviewed By: _____ Date: _____

2nd Interview Scheduled on: _____ at _____

Interviewed By: _____ Date: _____

| |
|---------------|
| Notes: |
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| |

Hired: Yes No Date: _____ Position: _____ Hrly Wage \$ _____

Approved: 1) _____ 2) _____ 3) _____
 Employment Manager Department Head General Manager