

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

				Date _____
Name _____				
Last	First	Middle	Maiden	
Present address _____				
Number	Street	City	State	Zip
How long _____		Social Security No. _____ - _____ - _____		
Telephone (____) _____		If under 18, please list age _____		
Email _____				

EMPLOYMENT DESIRED

Position applied for _____	Days/hours available to work: _____
and salary desired _____	_____
How many hours can you work weekly? _____	Can you work nights? _____
Employment desired <input type="checkbox"/> FULL-TIME ONLY <input type="checkbox"/> PART-TIME ONLY <input type="checkbox"/> FULL- OR PART-TIME	
When are you available to start work? _____	

EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION	YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Business or Trade School				
Professional or Graduate School				
Please describe other training, seminars, coursework, etc. that applies to the job.				

WORK EXPERIENCE

Please list your work experience for at least the past five years or last four employers beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of Employer Address City, State, Zip Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

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Are you currently employed? Yes No

May we contact your present employer? Yes No

Did you complete this application yourself Yes No

If not, who did? _____

Have you ever been convicted of a felony? Yes No

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____

Have you ever been in the armed forces? Yes No

Specialty _____ Date Entered _____ Discharge Date _____

Are you now a member of the National Guard? Yes No

If hired, can you provide proof of U.S. citizenship Yes No

or proof of your legal right to live and work in this country?

Have you ever been employed with this company? Yes No

If yes, when? _____

Do you have any friends or relatives employed by this company? Yes No

If yes, please provide their names and relationship to you.

If hired, would you have a reliable means of transportation to and from work? Yes No

Are you able to perform the essential functions and duties Yes No

of the job for which you are applying?

If not, please describe the functions or duties you are unable to perform. _____

APPLICATION FORM WAIVER

Please read each paragraph closely, initial each, and sign below

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or any other document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I hereby authorize the Company to thoroughly investigate my references, work records, education, driving record, credit history, criminal background and other matters related to my suitability for employment. I further authorize the employers, schools and other references I have listed to disclose to the company any and all documents, transcripts, letters, reports and other information related to these references, without giving me prior notice of such disclosure. I further authorize an investigative consumer report from an agency such as Equifax and will sign a release to that effect. I hereby release the Company, my former employers, and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosures.

I hereby agree to submit to binding arbitration all disputes and claims arising out of the submission of this application. I further agree, in the event that I am hired by the Company, that all disputes which might arise out of my employment with the Company and cannot be resolved by informal internal procedures, whether during or after employment, be submitted to binding arbitration. Said disputes and claims include but are not limited to those involving a violation of civil rights, sexual harassment, discrimination, and wrongful termination. I agree that such arbitration shall be conducted under the rules of the American Arbitration Association in the county in which the Company's primary place of business is located. I understand as a condition of employment that I may be required to enter into a stand alone arbitration agreement.

I understand that nothing contained in the application, or conveyed during any interview which may be granted, or during my employment, if hired, is intended to create an employment contract between me and the Company, other than one that is "at will." I understand and agree that if I am employed, my employment will be of an "at will" nature, whereby either the employee or the employer may terminate the employment relationship at any time, with or without cause or notice. I further understand that my employment, if hired, is for no definite or determinable period of time and may be terminated at any time, at the option of either myself or the Company, and that no promise or representation contrary to the foregoing is binding on the company unless made in writing and signed by me and the company's designated representative.

I further understand that my employment with the Company shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of applicant _____ Date: _____

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY _____ DATE _____

REMARKS

NEATNESS		CHARACTER		
PERSONALITY		ABILITY		
HIRED	FOR DEPT.	POSITION	WILL REPORT	SALARY WAGES

APPROVED: 1. _____ **EMPLOYMENT MANAGER** 2. _____ **DEPARTMENT HEAD** 3. _____ **GENERAL MANAGER**

This application for employment is sold only for general use throughout the United States. Adams assumes no responsibility and hereby disclaims any liability for the inclusion in this form of any questions or requests for information upon which a violation of local, state, and/or federal law may be based. It is the user's responsibility to ensure that this form's use complies with applicable laws, which change from time to time.