

Indicate education institutions attended, where degrees/certificates were received and the number of years completed:

_____	_____
_____	_____
_____	_____

Please indicate any foreign languages you can speak, read and/or write. Circle your fluency level.

_____	_____	_____	_____	_____	_____
Fluent	Good	Fair	Fluent	Good	Fair
_____	_____	_____	_____	_____	_____
Fluent	Good	Fair	Fluent	Good	Fair

Describe any specialized training, apprenticeship, skills or job related training:

Do you have any previous military training with the United States military? Y N
 If yes, please explain _____

Please list all of your previous employers, starting with the most recent. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities or other protected status. The employers provided on this sheet can be used as contacts for job references.

Employer	Job Title	Dates Employed: From _____ To _____
Address	Supervisor	Hourly Rate/Salary: Start _____ Finish _____
Telephone Number	Job Description:	
Reason for leaving last job:		

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Telephone Number	Job Description:	
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Please list any additional information or qualifications you feel may be helpful to us in considering your application

For Personnel Department Use Only					
Arrange Interview	YES	NO	Employed	YES	NO
Remarks _____			Date of Employment _____		
_____			Job Title _____		
_____			Hourly Rate/Salary _____		
_____			Department _____		
Authorization Signature _____			Date _____		

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employers.

It is company policy, as stated in the handbook that drug testing is required for employment.

Signature of Applicant _____

Date _____

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached. YES NO

For Personnel Department Use Only		
Position(s) Applied for is Open :	YES	NO
Position(s) Considered for:	_____	

