

FORMER EMPLOYERS – List below last four employers starting with last one first

Date: Month/Year	Name & Address of Employer	Salary	Position	Reason for Leaving
From:				
To:				
From:				
To:				
From:				
To:				
From:				
To:				

REFERENCES – Give below the names of three persons not related to you, whom you have known at least one year.

Name	Address	Business	Years Acquainted
1.			
2.			
3.			

Have you ever been convicted of a felony or misdemeanor? _____
 If so, when and where? _____
 Please explain: _____

Have you ever been charged with a felony or misdemeanor? _____
 If so, when and where? _____
 Please explain: _____

PHYSICAL RECORD

Can you perform the essential functions of the job for which you are applying? _____
 If no, why not? _____

In case of emergency notify: Name _____ Address _____ Phone _____

As part of our procedure for processing your employment application, an investigative report may be made in which information is obtained through credit and criminal checks, personal interviews with family members, business associates, financial sources, friends, neighbors or other third parties with whom you are acquainted. This information will include inquiries as to your character, general reputation, personal characteristics or mode of living, whichever is applicable. I authorize investigation of all statements contained in this application.

I authorize the above referenced investigations as well as the investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice. I understand and agree that I may be required to submit to a drug test, or that my offer of employment may be conditioned upon my passing a physical.

I agree to conform to the rules and regulations of the Company and that, if hired, my employment will be at-will and may be terminated with or without notice at any time at my option or at the option of the company. I understand that only a written agreement expressly to the contrary signed by me and by the President of the Company can vary this employment-at-will policy.

Date _____ Signature _____

DO NOT WRITE BELOW THIS LINE

Interviewed by: _____ Date: _____

Remarks: _____

Hired: _____ For Dept.: _____ Position: _____ Salary Wages: _____