Application for Employment

Please Print

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

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

Name _____ Applicant ID # _____
Last First Middle

Address _____
Street City State ZIP Code

Telephone # (___) _____ Cellular/Other # (___) _____ E-mail Address _____

Referral Source (How did you hear about us?) _____

If you are under 18 and it is required, can you furnish a work permit? ☐ Yes ☐ No

If **no**, please explain: _____

Have you ever been employed here before? If **yes**, give dates and positions: _____ ☐ Yes ☐ No

Is this application a request for reemployment following an extended military leave of absence from this company? ☐ Yes ☐ No
If **yes**, additional information may be requested.

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

Date available for work ___/___/___ What is your desired salary range? $ _____

Type of employment desired: ☐ Full-Time ☐ Part-Time ☐ Temporary ☐ Seasonal ☐ Educational Co-Op

Are you able to perform the "essential functions" of the job for which you are applying (with or without reasonable accommodation)?

This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law.

☐ Yes ☐ No ☐ Need more information about the job's "essential functions" to respond

Driver's license number required if driving may be required in the job for which you are applying: _____ State ____

Answering "yes" to either part of the following question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever pleaded "guilty" or "no contest" to, or been convicted of, a crime? ☐ Yes ☐ No

If **yes**, please provide date(s) and details: _____

Employment History

Starting with your most recent employer, provide the following information.

Employer | Telephone # ( ) | Dates employed: Month / Year to Month / Year

Street address | City | State | Compensation (Starting): ☐ Hourly ☐ Salary $ per

Starting job title/final job title | Commission/Bonus/Other Compensation $

Immediate supervisor and title (for most recent position held) | May we contact for reference? ☐ Yes ☐ No ☐ Later | Compensation (Final): ☐ Hourly ☐ Salary $ per

Why did you leave? | E-mail: | Commission/Bonus/Other Compensation $

Summarize the type of work performed and job responsibilities.

Employer | Telephone # ( ) | Dates employed: Month / Year to Month / Year

Street address | City | State | Compensation (Starting): ☐ Hourly ☐ Salary $ per

Starting job title/final job title | Commission/Bonus/Other Compensation $

Immediate supervisor and title (for most recent position held) | May we contact for reference? ☐ Yes ☐ No ☐ Later | Compensation (Final): ☐ Hourly ☐ Salary $ per

Why did you leave? | E-mail: | Commission/Bonus/Other Compensation $

Summarize the type of work performed and job responsibilities.

Employer | Telephone # ( ) | Dates employed: Month / Year to Month / Year

Street address | City | State | Compensation (Starting): ☐ Hourly ☐ Salary $ per

Starting job title/final job title | Commission/Bonus/Other Compensation $

Immediate supervisor and title (for most recent position held) | May we contact for reference? ☐ Yes ☐ No ☐ Later | Compensation (Final): ☐ Hourly ☐ Salary $ per

Why did you leave? | E-mail: | Commission/Bonus/Other Compensation $

Summarize the type of work performed and job responsibilities.

Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying:

Computer Skills (Check appropriate boxes. Include software titles and years of experience.)

☐ Word Processing _____ Years: _____ ☐ E-mail _____ Years: _____

☐ Spreadsheet _____ Years: _____ ☐ Internet _____ Years: _____

☐ Presentation _____ Years: _____ ☐ Other _____ Years: _____

Educational Background

Starting with your most recent school attended, provide the following information.

School (include City & State)	Years Completed	Completed	GPA Class Rank	Major/Minor
		☐ Diploma ☐ GED ☐ Degree _____ ☐ Certification _____ ☐ Other _____		
		☐ Diploma ☐ GED ☐ Degree _____ ☐ Certification _____ ☐ Other _____		
		☐ Diploma ☐ GED ☐ Degree _____ ☐ Certification _____ ☐ Other _____		

References

List names and telephone numbers 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	Title	Relationship to You	Telephone	E-mail	# of Years Known
			( )		
			( )		
			( )		

Social Security Number

SS# _____ - _____ - _____ We will use this information only for employment purposes and make reasonable efforts to safeguard your privacy.

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resumé or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

This Company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state, or local law. This Company likewise does not tolerate harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status. The Company takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ **Date** ___/___/___

gNeil

©2008 G.Neil
720 International Parkway, Sunrise, FL 33325
800-999-9111 • www.gneil.com to reorder
Application for Employment (Short Form) #R8-A1064

ATTORNEY DEVELOPED

G.Neil assumes no responsibility for the employer's use of this form or any decision the employer makes that may violate local, state or federal law. By selling this form, G.Neil is not giving legal advice.
The purchaser of this form is granted a limited license to photocopy the completed form for its internal use only. Any other photocopying or reproducing in any form, whether in whole or in part, is strictly prohibited.