

# APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to non-discrimination in employment on the basis of race, color, age, religion, sex, national origin, handicap, disability or marital status.

Date: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

Name: \_\_\_\_\_ Are you 18 years or older?  Yes  No  
Last First Middle

Present Address: \_\_\_\_\_  
Street Address City State Zip

Permanent Address: \_\_\_\_\_  
Street Address City State Zip

Phone Number: \_\_\_\_\_ Referred by: \_\_\_\_\_

If related to anyone who works for the Company, State Name, Department and Location: \_\_\_\_\_

In case of emergency, please notify: \_\_\_\_\_  
Name Address and Telephone Number

## EMPLOYMENT DESIRED

Position: \_\_\_\_\_ Date you can start: \_\_\_\_\_ Salary desired: \_\_\_\_\_

Are you employed now?  Yes  No If so, may we inquire of your present employer?  Yes  No

Have you ever applied to the company before?  Yes  No If so, where? \_\_\_\_\_ When? \_\_\_\_\_

Are there any days, shifts or hours you will not work? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

## EDUCATION

	Name and Location	Degree/Certificate	Subjects studied	Grade Average
Grammar School:				
High School:				
College:				

Trade, Business or Correspondence School:				
Other (including Graduate school):				

Have you ever been convicted of, or pled guilty, no contest or *nolo contendere* to a crime? \_\_\_Yes \_\_\_No

If yes, give detail (date, place, offense(s), disposition): \_\_\_\_\_

Have you ever been charged with a crime and either been placed on a court-ordered probation, had adjudication withheld, entered a pre-trial intervention program or have any criminal charges now pending? \_\_\_Yes \_\_\_No

If yes, give detail (date, place, offense(s), disposition): \_\_\_\_\_

Have you ever been a defendant in a civil action for intentional tort(s) (e.g. assault, battery, intentional infliction of emotional distress), or an unlawful employment practice ) e.g. sexual or racial harassment) \_\_\_Yes \_\_\_No

If yes, give detail (date, place, offense(s), disposition): \_\_\_\_\_

**PREVIOUS EMPLOYMENT:** List below sequentially all of your employers in the last ten (10) years beginning with your current or most recent employer (use additional pages if necessary)

Date Month & Year	Name, Address, Phone #	Position/Duties	Salary	Reason for Leaving
From:				
To:				
From:				
To:				
From:				
To:				

Did you work for any of these employers under a different name? \_\_\_Yes \_\_\_No

If yes, which employer(s) and under what name(s)? \_\_\_\_\_

Please explain any gaps in your employment history: \_\_\_\_\_

Have you ever been discharged or asked to resign? \_\_\_Yes \_\_\_No

If yes, please explain (include by whom, when and for what): \_\_\_\_\_

## DRIVING RECORD

Do you have a valid driver's License? \_\_\_Yes \_\_\_No What class of license do you possess? \_\_\_\_\_

Driver License Number: \_\_\_\_\_

Have you ever had your license or driving privileges revoked, suspended, or placed on probation? \_\_\_Yes \_\_\_No

If yes, please explain (include when, where and what action was taken): \_\_\_\_\_

Have you ever failed or refused a drug or alcohol test administered pursuant to the Federal Highway Administration's or Department of Transportation regulations or Florida's Drug Free Workplace Act? \_\_\_Yes \_\_\_No

If yes, please explain (include when, where and action was taken): \_\_\_\_\_

How many speeding or other moving violations have you received in the last three (3) years? \_\_\_\_\_

List below all traffic violations (except parking) on your record for the last five (5) years and all motor vehicle accidents in which you were involved (use additional pages if necessary).

Date	Location	Description	Result

**REFERENCES:** Give below the names of three (3) persons not related to you, whom you have known at least one year.

Name	Phone Number	Years Known

### **EMPLOYMENT APPLICATION CERTIFICATION**

I hereby certify that all of the facts and information listed on his employment application are true and complete. I understand that any false, incomplete or misleading information given by me on this application is sufficient cause for rejection of this application. I also understand and agree that any such false, incomplete, or misleading information discovered on this application at any time after employed may result in my dismissal.

I hereby authorize the company to investigate all statements contained in this application and to interview the references and previous employers listed in this application. I authorize the references and previous employers listed to give the company all fact, opinions and evaluations concerning my previous employment and any other information they may have, personal or otherwise and realize all such parties from any liability for defamation or invasion of privacy.

If I am offered employment, I understand that such an offer will be conditioned upon satisfactory results of a background investigation and/or company medical examination or inquiry, including a drug screen test. If then employed, I understand that I will be required to serve a ninety (90) day probationary period. I further understand that my employments and compensation can be terminated, with or without cause or notice at any time, regardless of the successful completion of my probationary period, at the option of either the company or myself. I understand that no supervisor or other representative of the company other than the president of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

I further understand and voluntarily agree as a condition of employment or my continued employment, that I may be requested by the company to submit to a urinalysis or other drug screen test and that my failure to take such test(s) when requested to do so or unsatisfactory test results will disqualify me from consideration from employment, or if I am then employed, may result in my immediate dismissal.

I certify that I have read, understand and agree with the above.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant