

# Employment Application

To be considered for employment you must answer all questions on this application. Please attached a resume, if you'd like to included additional details. *We comply with all applicable state and federal laws prohibiting employment discrimination based on [protected classifications](#).*

Employer		Position	
<b>PERSONAL INFORMATION</b>			
Name (last, first, middle)			
Street Address		City	State Zip
Home Telephone Number	Business Telephone Number	Email Address	
Linkedin Profile(optional)		Professional website/Portfolio URL(optional)	
Date you can start work	Salary Desired	Do you have a High School Diploma or GED? Yes No	
<b>POSITION INFORMATION</b> Choose all you are willing to work			
Hours: Full Time Part Time	Status: Regular Temporary	Days Evenings	Swing Graveyard Weekends
Will you now or in the future require sponsorship for employment visa (e.g,H-1B visa status)?		Yes	No
Are you authorized to work in the U.S. on an unrestricted basis?		Yes	No
Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment.) Yes No If yes, explain:			
Have you been told the essential functions of the job or have you been viewed a copy of the job description listing the essential functions of the job? Yes No Can you perform these essential functions of the job with or without reasonable accommodation? Yes No			
<b>QUALIFICATIONS</b> Please list any relevant education and training			
	School Name	Degree	Address/City/State
School			
School			
Other			

**SPECIAL SKILLS** Please list any relevant skills or experience (leadership, management, etc.)**REFERENCES** Please list three professional references (completed all fields)

Name	Address/City/State	Phone	Relationship

May we contact your present employer?      **Yes**      **No**      **N/A**      **Years of relevant work experience**

**WORK HISTORY** List your most recent employment first and work back. Use a separate sheet if necessary

<b>Job Title #1</b>	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor' s Name	Phone Number
City	State	Zip
Duties:		
Reason for Leaving	Starting Salary	Ending Salary

<b>Job Title#2</b>	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor' s Name	Phone Number
City	State	Zip
Duties:		
Reason for Leaving	Starting Salary	Ending Salary

<b>Job Title#3</b>	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor' s Name	Phone Number
City	State	Zip
Duties:		
Reason for Leaving	Starting Salary	Ending Salary

<b>Job Title #4</b>	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor' s Name	Phone Number
City	State	Zip
Duties:		
Reason for Leaving	Starting Salary	Ending Salary

I certify that the information included in this Employment Application is true and complete to the best of my knowledge. I understand that if I employed, false statements, omissions or misrepresentations may result in my termination. I authorize the Employer to investigate and validate the information included in the Employment Application and release the Employer from any liability. The Employer may contact any references listed in this Employment Application.

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

\_\_\_\_\_  
Date

<https://yarro.org/business-forms/>