An Equal Opportunity Employer

Please	Print
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Last Name	First Name	Middle	
	City	State	Zip Code
(if different from present	address)		
	City	State	Zip Code
Home Phone	Email Address		
ed			
or:			
ion			
bout our company and th	is job opening?		
ied to or worked for		befo	ore? Yes No
ng for work at			?
	(if different from present Home Phone ed or:	(if different from present address)	City State (if different from present address)

If hired, would you have a reliable means of transportation to and from work?
Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age.)
Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?
If no, describe the functions that cannot be performed.

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)

We may refuse to hire relatives of present employees if doing so could result in actual or potential problems in supervision, security, safety, or morale, or if doing so could create conflicts of interest.

Education, Training, and Experience

School	Name and Address			No. of Years Completed	Did you Graduate?	Degree or Diploma
High School					Yes No	
School	Name					
	Address					
	City	State	Zip Code	_		
College/ University					Yes No	
University	Name					
	Address					
	City	State	Zip Code	-		

Education, Ti	raining, and	Experience -	continued
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School	Name and Address			No. of Years Completed	Did you Graduate?	Degree or Diploma
Vocational/ Business	Name				Yes No	
	Address					
	City	State	Zip Code			
Health Care Training	Name				Yes No	
	Address					
	City	State	Zip Code			

Employment History

List below all present and past employment starting with your most recent employer (last five years is sufficient). You must complete this section even if attaching a resume.

		Phone Number Your Supervisor's Name			
					Address & Street
Dates of Employm	nent:				
	From	То			
Current Employer	r ?				Yes 🗌 No
Your Position and Du	ties				
Reason for Leaving					
May we contact tl	his employer for a	reference?			Yes No

Name of Employer		Phone Number Your Supervisor's Name			
Type of Business					
Address & Street			City	State	Zip Code
Dates of Employmen	t:				
	From	То			
Your Position and Duties					
Reason for Leaving					
May we contact this	employer for a	reference?			Yes 🗌 No
Note: Attach additional pa	age(s) if necessary.				

References

List below three persons not related to you who have knowledge of your work performance within the last three years.

	City No. of Years Acquainted	State	Zip Code
	No. of Years Acquainted		
Last Name		Phone	Number
	City	State	Zip Code
	No. of Years Acquainted		
Last Name		Phone	Number
	City	State	Zip Code
	No. of Years Acquainted		
		City City No. of Years Acquainted Last Name City City	City State No. of Years Acquainted Phone Last Name City City State

Please Read Carefully, Initial Each Paragraph and Sign Below

Initials	I hereby certify that I have not knowingly withheld any inform chances for employment and that the answers given by me a knowledge. I further certify that I, the undersigned applicant I understand that any omission or misstatement of material f used to secure employment shall be grounds for rejection of if I am employed, regardless of the time elapsed before disco	are true and correct to the best of my , have personally completed this application. fact on this application or on any document this application or for immediate discharge overy.
	I hereby authorize	to thoroughly investigate my
Initials	references, work record, education and other matters related criminal background information) unless otherwise specified have listed to disclose to the company any and all letters, rep work records, without giving me prior notice of such disclose my former employers and all other persons, corporations, pa claims, demands or liabilities arising out of or in any way rela	l above. I further authorize the references I ports and other information related to my ure. In addition, I hereby release the Company, rtnerships and associations from any and all
Initials	I understand that nothing contained in the application, or con- granted or during my employment, if hired, is intended to cr and the Company. In addition, I understand and agree that if definite or determinable period and may be terminated at an option of either myself or the Company, and that no promise foregoing are binding on the company unless made in writin designated representative.	eate an employment contract between me I am employed, my employment is for no ny time, with or without prior notice, at the es or representations contrary to the
Initials	In compliance with federal law, all persons hired will be requined in the United States and to complete the required employme upon hire.	

The Company will consider qualified applicants, including those with criminal histories, in a manner consistent with state and local "Fair Chance" laws.

Date

Applicant's Signature