



**CRIMINAL BACKGROUND**

Have you ever been convicted of a crime? \_\_\_\_ Yes \_\_\_\_ No *(A conviction will not necessarily disqualify you from employment.)*

If yes, explain the number of conviction(s) and nature of offense(s) leading to conviction(s). How recent? When, where committed, all details: \_\_\_\_\_

**MILITARY**

Have you ever been in the armed forces? \_\_\_\_ Yes \_\_\_\_ No

Are you now a member of the armed forces? \_\_\_\_ Yes \_\_\_\_ No

Specialty \_\_\_\_\_ Date Entered \_\_\_\_\_ Discharge Date \_\_\_\_\_

**WORK EXPERIENCE**

Please list your work experience beginning with your most recent job.

If you were self employed, give firm name. Attach additional sheet if necessary.

| Employer                          | Employment Dates         | Pay or Salary |
|-----------------------------------|--------------------------|---------------|
| Name:                             | From:                    | Start:        |
| Street Address:                   | To:                      | Final:        |
| City, State, Zip:                 | Your Job Title:          |               |
| Phone Number:                     | Name of Last Supervisor: |               |
| Reason for Leaving (be specific): |                          |               |
|                                   |                          |               |
| Employer                          | Employment Dates         | Pay or Salary |
| Name:                             | From:                    | Start:        |
| Street Address:                   | To:                      | Final:        |
| City, State, Zip:                 | Your Job Title:          |               |
| Phone Number:                     | Name of Last Supervisor: |               |
| Reason for Leaving (be specific): |                          |               |
|                                   |                          |               |
| Employer                          | Employment Dates         | Pay or Salary |
| Name:                             | From:                    | Start:        |
| Street Address:                   | To:                      | Final:        |
| City, State, Zip:                 | Your Job Title:          |               |
| Phone Number:                     | Name of Last Supervisor: |               |
| Reason for Leaving (be specific): |                          |               |
|                                   |                          |               |

May we contact your current employer? \_\_\_\_\_ Yes \_\_\_\_\_ No

Did you complete this application yourself? \_\_\_\_\_ Yes \_\_\_\_\_ No

If not, who did? \_\_\_\_\_

After reviewing the attached job description, please indicate if you are able to perform the essential functions of the job for which you have applied, with or without a reasonable accommodation? \_\_\_\_\_ Yes \_\_\_\_\_ No

PLEASE READ CAREFULLY

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives from seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

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We are an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, gender, sexual orientation, national origin, citizenship, age, height, weight, or disability. We assure you that your opportunity for employment with us depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.

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Applicant Signature

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Date