APPLICATION FOR EMPLOYMENT



Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age marital or veteran status, or the presence of a non-job related medical condition or handicap.

Date of	Application _		
☐ Friend ☐ Re	elative \square W	alk-In	
gency Other			
First		Middle	
	City	State	Zip Code
Social Securi	ity Number _		
can you furnish a w	vork permit?	Yes	No
before? □Yes □N	o If yes, gi	ve date	
before? \(\subseteq \text{Yes} \(\supseteq \text{N} \)	o If yes, gi	ve date	
May we contact	your present e	mployer? []Yes □ No
are legally es?	es N	0	
ole to work?			
ıll Time 🔲 Part-T	Time Shift	Work 🗆 Te	emporary
☐ Yes	\square No		
y within the last 7 y licant from employment.)	years?	☐ Yes	□No
	Friend Regency OtherSocial Secursocial Securcan you furnish a velocity before? Yes No May we contact are legally es? Yes let to work?sole to work?	Friend Relative W gency Other First City Social Security Number _ can you furnish a work permit? before? Yes No If yes, gi before? Yes No If yes, gi o May we contact your present e are legally es? Yes No ole to work? Part-Time Shift	Friend Relative Walk-In gency Other First Middle Richard Middle Relative Walk-In gency Other Relative Walk-In gency Other Richard Middle Richard M

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include military service assignments and volunteer activities. All information should be completed and reasons for any time lapse should be noted.

1	Employer	Telephone	Dates E		WORK PERFORMED		
1	Address		From	То	,, 91111 1 2111 9111122		
	Address						
	Job Title		Hourly Ra				
			Starting	Final			
	Supervisor						
	Reason for Leaving		1				
_	Employer	Telephone	Dates E	mployed	WORK PERFORMED		
2		1	From	То	WORK TERE OR VIEW		
	Address						
	I.1. T'41.		Hourly Ra	ite/Salary			
	Job Title		Starting	Final			
	Supervisor						
	Reason for Leaving		1				
	Employer	Telephone	Dates E	mploved	WORK PERFORMED		
3	Zin projer	1010p mone	From	То	WORK PERFORMED		
	Address		110111				
	Job Title		Hourly Ra	ite/Salary			
			Starting	Final			
	Supervisor						
	Reason for Leaving		1				
4	Employer	Telephone	Dates E	mployed	WORK PERFORMED		
4			From	То	WORK PERFORMED		
	Address						
	T 1 (T): 1		Hourly Ra	ite/Salary			
	Job Title		Starting	Final			
,	Supervisor						
	Reason for Leaving		1				
5	Employer	Telephone	Dates E	mployed	- WORK PERFORMED		
3			From	То	WORK FERFORMED		
	Address						
	Job Title		Hourly Ra	ite/Salary			
	Job Title		Starting	Final			
	Supervisor						
	Reason for Leaving]				
	L		1		I		

Summarize special skills and qualifications acquired from employment or other experience such as specific office skills, machines used, etc.
Veteran of the U.S. Military service? Yes No If Yes, Branch
List professional, trade, business or civic activities and offices held. (You may exclude those which indicate race, color, religion, sex or national origin):
Give name, address and telephone number of three references who are not related to you and are not previous employees.

EDUCATION

	Elementary			High			College/University			Graduate/ Professional							
School Name																	
Years Completed (circle)	4	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree Describe Course of Study																	
Describe Specialized Training, Apprenticeship, Skills, and Extra- Curricular Activities																	

Honors Received:

State any additional information you feel may be helpful to us in considering your application.

Applicant's Statement

I understand this application is considered current for 90 days. If I want to be considered for employment after that time, I must renew my application in writing.

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not and is not intended to be a contract of employment. I further understand said background check may also involve the Company's obtaining an investigative consumer report on me which may cover such areas as my character, general reputation and mode of living.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Company.

		Signature of Ap	Signature of Applicant							
For Personnel Department Use Only										
Arrange In Remarks _	nterview	Yes No								
- Employed	☐ Yes	□No	Date of Employn	Interviewer nent	Date					
Job Title _		Hourly Rate/ ——— Salary ——	Departme	ent						
		ByNam	ne and Title		Date					