

Application for Employment

Name _____ Date ____/____/____
Last First M.I.

Position applying for _____

Address _____
Street City State Zip

Primary Telephone () _____ - _____ E-mail _____

Have you previously been employed with this company? Yes No
 If "yes" give dates and job title: _____

Are you legally eligible for employment in this country? Yes No

Are you at least 16 years of age? Yes No Are you at least 18 years of age? Yes No

Date available to start work: ____/____/____

Type of employment desired: Part-time Full-time Seasonal

Have you ever pled "guilty" or "no contest" or been convicted of a crime? Yes No
 If "yes", please provide date(s) and details. _____
(Answering "yes" to this question does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.)

Indicate hours available to work:

Monday	Thursday	Sunday
Tuesday	Friday	Number of desired Hours per week:
Wednesday	Saturday	

Employment History Provide the following information for your past three employers, assignments or volunteer activities, starting with the most recent.

Current/Most recent employer	Employer	Employer
Address	Address	Address
Telephone #	Telephone #	Telephone #
Job Position	Job Position	Job Position
Start Date End Date	Start Date End Date	Start Date End Date
Reason for Leaving	Reason for Leaving	Reason for Leaving
Supervisor's Name	Supervisor's Name	Supervisor's Name
May we contact for Reference? Yes No Later	May we contact for Reference Yes No Later	May we contact for Reference Yes No Later
Starting Rate of Pay	Starting Rate of Pay	Starting Rate of Pay
Ending Rate of Pay	Ending Rate of Pay	Ending Rate of Pay
Summary of job responsibilities	Summary of job responsibilities	Summary of job responsibilities

Education Background

High School	College
City/State	City/State
Course of Study	Course of Study
Did you Graduate?	Did you Graduate?

Personal References Do not include relatives

Name	Name	Name
Telephone Number	Telephone Number	Telephone Number
Years Known	Years Known	Years Known

Skills and Qualifications Summarize any training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying. _____

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the Alexandria Peterson Company is true, complete and correct.

I understand that information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to cancel further consideration of this application, or immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview, I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis of prohibited by applicable local, state and federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered, it will be necessary to reapply and fill out a new application.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 form in this regard.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ Date ____/____/____