



EMPLOYMENT APPLICATION

We consider applications for all positions without regard to race, color, religion, creed, sex, national origin, disability, sexual orientation, citizenship status or any other legally protected status.

Position(s) Applying For: _____ Date: ____ / ____ / ____

Last Name:	First Name:	Middle Name (if applicable):
_____	_____	_____
Email:		

Street Address:	City, State, Zip:	
_____	_____	
Phone #:		
_____	_____	

Best time to contact you is: _____

If you are under 18 years of age, can you provide
required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? Yes No

If yes, give date ____ / ____

Have you ever been employed with us before? Yes No

If yes, give date ____ / ____

Do any of your friends or relatives, other than spouse,
work here? Yes No

Are you currently employed? Yes No

May we contact your current employer? Yes No

Are you prevented from lawfully becoming employed in this
country because of Visa or Immigration status? Yes No

Date Available for Work: _____ Desired Salary Range: _____

Are you available to work: Full-Time
Part-Time
Temporary (please indicate dates: _____)

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Have you been convicted of a felony within the last five years? Yes No

WE ARE AN EQUAL OPPORTUNITY EMPLOYER



EDUCATION

	NAME OF SCHOOL & ADDRESS	COURSE OF STUDY	# OF YEARS COMPLETED	DIPLOMA DEGREE
ELEMENTARY SCHOOL				
HIGH SCHOOL				
UNDERGRADUATE COLLEGE				
GRADUATE PROFESSIONAL				
OTHER (SPECIFY)				

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

[illegible]



EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status.

1. Employer: _____ Phone #: _____

Address: _____

Job Title: _____ Supervisor: _____

Reason for Leaving: _____

Dates Employed: _____

Hourly Rate/ Salary; Starting: _____ Final: _____

Work Performed: _____

2. Employer: _____ Phone #: _____

Address: _____

Job Title: _____ Supervisor: _____

Reason for Leaving: _____

Dates Employed: _____

Hourly Rate/ Salary; Starting: _____ Final: _____

Work Performed: _____



3. Employer: _____ Phone #: _____

Address: _____

Job Title: _____ Supervisor: _____

Reason for Leaving: _____

Dates Employed: _____

Hourly Rate/ Salary; Starting: _____ Final: _____

Work Performed: _____

4. Employer: _____ Phone #: _____

Address: _____

Job Title: _____ Supervisor: _____

Reason for Leaving: _____

Dates Employed: _____

Hourly Rate/ Salary; Starting: _____ Final: _____

Work Performed: _____

List any professional, trade, business, or civic activities and offices held.



ADDITIONAL INFORMATION

Other Qualifications:

Summarize special job-related skills and qualifications acquired from employment or other experience.

State any additional information you feel may help us consider your application.

Can you perform the essential functions of the job, for which you are applying, either with or without reasonable accommodation? Yes ☐ No ☐

REFERENCES

1. Name: _____ Phone #: _____

Address: _____

2. Name: _____ Phone #: _____

Address: _____

3. Name: _____ Phone #: _____

Address: _____

I certify that answers given herein are true and complete. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period not to exceed 45 days. Any application wishing to be considered for employment beyond this time period should inquire as to whether applications are considered at that time. I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. In the event of employment, I understand that false and 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 employer.

Authorized Signature: _____ Date: ____ / ____ / ____

Print Name: _____

Please complete and email to Management@warshauer.com for consideration