



Employment Application

Personal Information

Name _____

Address _____

Phone Number _____ Date of birth _____

Email address _____

Employment History

Please list your last three places of employment:

Business _____ Position _____

Business _____ Position _____

Business _____ Position _____

References

Name	Relationship	Phone Number

Employment Eligibility

Are you legally allowed to work in the US? <input type="checkbox"/> Yes <input type="checkbox"/> No	Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever worked here before? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, what was your reason for leaving?

Position you are applying for _____

Desired start date _____

Availability

Are there any days that you are not available to work?	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday	<input type="checkbox"/> Thursday <input type="checkbox"/> Friday
Type of employment desired:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary	

I certify that the above information is true to the best of my knowledge.

Signature _____

Date _____

