



Application for Employment
An Equal Opportunity Employer

Position Applying for: _____

Date: _____

Note: This application form was designed to use with several types of jobs. Some questions may not be applicable to the job you are seeking; however, **please answer all questions.** Please print, except for your signature on the last page of the application. **Resumes are not accepted in lieu of a completed application form.**

Name (Last, First, Middle Initial): _____

Social Security Number: _____

Street Address: _____

City, State, Zip Code: _____

Daytime Telephone: _____ Home Telephone: _____

Applying for Full-time Part-time Seasonal Temporary

Date available for employment: _____ Salary Requirement: _____

Referral Source: Advertisement Walk-in Employee (Name: _____)
 Employment Agency (Name: _____)

Only U.S. citizens or aliens who have a legal right to work in the U.S. are eligible for employment. Can you, upon employment, submit documentation verifying your legal right to work in the U.S. and your identity? Yes No

Are you 18 years of age or older? Yes No

Is there anything that would prevent you from performing the activities involved in the job for which you've applied in a reasonable and safe manner? Yes No
 If yes, please explain: _____

EDUCATION

Educational Level	Name and Location of Institution	Dates attended		Number of Years Completed	Degree Obtained	Major Course of Study
		From	To			
High School						
College/University						
Graduate School						
Trade, business, or technical school						
Other						

In order to permit a check of your work and educational records, have you ever used a name or names other than those written above? Yes No. If yes, identify names and relevant dates: _____

Have you had prior educational experience, which relates to the job for which you are applying? Yes No. If yes, describe: _____

EMPLOYMENT EXPERIENCE

List your previous jobs (most recent job first), including self-employment, internship, and volunteer positions. Account for all time periods, including unemployment and military service. (Attach additional sheet(s), if necessary.) Go back at least 10 years or five employers whichever is longer. **Please complete this section even if you attach a resume.**

Name of Employer:		
Address:	Starting Date:	Ending Date:
	Starting Position:	Ending Position:
Name and Title of Immediate Supervisor:	Starting Salary:	Ending Salary:
May we contact? <input type="checkbox"/> Yes (Phone: _____) <input type="checkbox"/> No		
Describe your job responsibilities:		
Reasons for leaving:		

Name of Employer:		
Address:	Starting Date:	Ending Date:
	Starting Position:	Ending Position:
Name and Title of Immediate Supervisor:	Starting Salary:	Ending Salary:
May we contact? <input type="checkbox"/> Yes (Phone: _____) <input type="checkbox"/> No		
Describe your job responsibilities:		
Reasons for leaving:		

Name of Employer:		
Address:	Starting Date:	Ending Date:
	Starting Position:	Ending Position:
Name and Title of Immediate Supervisor:	Starting Salary:	Ending Salary:
May we contact? <input type="checkbox"/> Yes (Phone: _____) <input type="checkbox"/> No		
Describe your job responsibilities:		
Reasons for leaving:		

Name of Employer:		
Address:	Starting Date:	Ending Date:
	Starting Position:	Ending Position:
Name and Title of Immediate Supervisor:	Starting Salary:	Ending Salary:
May we contact? <input type="checkbox"/> Yes (Phone: _____) <input type="checkbox"/> No		
Describe your job responsibilities:		
Reasons for leaving:		

Do you have a reliable means of transportation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you able to work overtime if necessary?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you able to do shift work?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you able to work nights?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you able to work weekends?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you able to work a rotating work schedule?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any hours, shifts, or days you will not work?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain:
Do you have any friends or relatives who work here? Name:	<input type="checkbox"/> Yes <input type="checkbox"/> No Relationship:
Have you filed an application here before?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, give date:
Have you ever been employed here before?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, give dates:

Please answer the following questions. Note that a criminal record will not automatically be a bar to employment, and factors such as your age at the time of the offense, seriousness and nature of the violation, and subsequent rehabilitation will be considered. You need not disclose convictions that are contained in sealed or expunged records.	
Have you ever been convicted of a criminal offense (felony or misdemeanor, except for minor traffic violations)? You must answer "yes" if you have entered into a plea agreement, including a deferred prosecution or deferred judgment or sentence arrangement, in connection with a criminal charge.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever had a complaint filed against you with a professional licensing or grievance board, or been investigated regarding professional misconduct of any type?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been fired from a job or asked to resign?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Use this space to explain any "Yes" answers, including the date and nature of the offense or incident and any conviction, the name and address of any law enforcement agency or employer involved, and the court where any criminal proceedings occurred. Attach additional sheets if necessary.	

APPLICANT STATEMENT

Please read before signing the employment application:

ERC is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, age, sex, religion, national origin, disability, sexual orientation, or marital status. We assure you that your opportunity for employment with us depends solely on your qualifications.

I understand that the employer will thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools, and firms named therein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information.

I understand that the employer follows an "employment at will" policy, in that I or the employer may terminate my employment at any time, or for any reason consistent with applicable state or federal law; this "employment at will" policy cannot be changed verbally or in writing, unless the change is specifically authorized in writing by the Human Resource Director of this organization. I understand that this application is not a contract of employment. I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit satisfactory proof of employment authorization and identity; failure to submit such proof will result in denial of employment.

I understand this application will be active for a period of three months; after that time, if I wish to be considered for employment, I must submit a new application.

If employed by ERC, I will comply with any rules or regulations set forth in its employee handbooks, policies and procedures manuals, and in other communications distributed or announced to employees.

I hereby waive and release ERC and its directors, officers, employees, agents, and representatives from any and all claims that might arise from reviewing and processing my application and conducting the above-referenced background investigations. I understand that my employment with ERC and any offer of employment are conditioned on the receipt by ERC of background information completely satisfactory to ERC. ERC may withdraw an offer of employment or terminate employment if new or different information that reflects negatively on my qualifications or credentials is received by ERC.

I certify that all the statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

Date: _____ Signature: _____