

Who should we contact to confirm current employment data? _____.

Name / Title / Telephone #

Can we talk to your current employer now, or only if you are hired? Now _____ Only if hired _____

Have you ever been employed by us before? Yes ___ No ___. If "Yes" please state the positions held, period of employment and reason for leaving: _____

IV. Education

School	Name and Location	Graduated? Y/N	Major Subjects
High School			
College			
Technical or Graduate School			

What special training or skills do you have for this job position? _____

V. Criminal Record

Have you been convicted of or plead guilty (includes also deferred judgment and no contest plea) to a crime or subjected to court martial? (Do not include crimes for which public records are sealed or have been expunged) Yes ___ No ___. If "Yes," identify nature of the offense, county and state where convicted, date of conviction, and sentence or fine imposed.

If you are presently charged with committing a criminal offense, identify nature of offense, county and state where charges are pending, and status of the charges: _____.

VI. Illegal Drugs. Within the past 60 days, have you used marijuana, cocaine, any narcotics, amphetamines, or barbiturates? Yes ___ No ___. And have you used other controlled substances that were not taken as prescribed to you by a physician? Yes ___ No ___.

VII. References (Business and Professional only)

Name	Address/Phone	Relationship/ Years Acquainted

PLEASE READ THE FOLLOWING PARAGRAPH BEFORE SIGNING THIS APPLICATION

I certify that the information in this application is correct to the best of my knowledge. I understand that any misrepresentation of information by statement or omission will result in disqualification or, if already hired, dismissal from employment, no matter when the misrepresentation is discovered. I authorize Employer to contact my references, investigate my employment history, education, criminal record, and if applicable, driving record, and to obtain a consumer report regarding me. I agree to assist Employer in obtaining background information on me by signing any authorization/release forms necessary to obtain such information. I will submit to and pass any drug test required by Employer as a condition of employment. **All employment with Employer is at-will, meaning that employment with Employer may be terminated, with or without cause, and with or without prior notice, at any time, at the option of either me or the Employer.** I understand that no supervisor or manager has the authority to enter into an agreement for employment that waives Employer's right to terminate employment at will. I understand that Employer has policies and procedures that I must follow, if hired. I understand that Employer reserves the right to change its policies and procedures, including personnel policies and employee benefits at any time without approval by employees, and that these changes are accepted by continuing my employment with Employer. I certify that I am submitting this application because of a good faith desire for employment with Employer. If offered employment, I will consider the offer, and if I accept, I will fulfill the requirements of the job to the best of my ability.

Applicant's Signature

Date