APPLICATION FOR EMPLOYMENT

Our company is an Equal Opportunity Employer that employs in compliance with all applicable laws. We do not discriminate because of sex, age, race, color, religious creed, marital status, national origin, ancestry, disability or handicap.

	Date:
PERSONAL INFORMATION	
Name	first middle initial
Address	state zip code
Telephone Social	宇宙 割と かぶって かくえる かんがん しんしょう ないかい かか かりかい かんかびし 出す 夜遊議論
If under 18 years of age, do you have a work permit? Yes	建物学的 化过度 化过去分词 计正式推断 化石质风 网络拉根科拉人物 化合金磷酸
Are you either a U.S. citizen, or an alien who has the legal r (You will be required to furnish proof of lawful work status if you	
EMPLOYMENT DESIRED	
Position for which you are applying:	
Full-time Part-time Fill-in Summer Date of availability:	
Do you have a valid driver's license? (Only answer this question	
Can you travel if a job requires it? Yes 🗆 No 🗆	
Have you ever applied for employment with this company?	Yes D No D If yes, when?
Were you ever previously employed by this company? Yes [■ No □ If yes, when?
In what position?	
Please list any special skills you have:	
If you served in the military service of the United States, did y the job for which you are applying? Yes I No I If yes, please describe:	
EDUCATION	
Highest Grade Completed (Please circle) 1 2 3 4 5 Grade Sc	
Name of last school attended:	
Vocational or trade school:	
Course of Study:	
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REFERENCES				
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Name and Occupation		Address		Phone Number
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FORMER EMPLOYERS

List below your work experience, starting with your present or last place of employment. You may include verifiable volunteer work experience.

Date Employed Name & Address of Employer Name of Supervisor	Position & Salary Reason for Leaving
from to	start finish
from to	start finish
from	start
	finish
from to	start finish
from	start
to	finish
May we contact your employer at this time? Yes \Box No \Box	

I understand that any employment will be on a day introductory basis and that my employment may be terminated, with or without cause or notice, at any time, at my option or that of this company. I understand that no management representative has any authority to enter into any agreement for continuing employment for any specific period of time or which is contrary to the foregoing without written approval of the company president. I give the company permission to contact all or any of my previous em ployers and references and authorize them to provide all informat ion requested of them by this company. I authorize you to obtain, use and rely upon that information in relation to my application. I have provided truthful and complete responses to all inquiries in the application and understand that the discovery of any falsification or omission constitutes a ground for immediate dismissal. If employed by this company, I will abide by its rules and regulations, which I understand are subject to change by the firm.

Date

Signature of Applicant

It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

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