

EMPLOYMENT APPLICATION

APPLICATION INFORMATION (PLEASE PRINT)

(Por favor imprima)

*Please fill in the highlighted fields

First Name: (Nombre)		Middle Name (Segundo Nombre)	Last Name: (Apellido)
Preferred Name: (Nombre Preferido)			
Address: (La dirección)			
City: (Ciudad)	State: (Estado)	Zip: (Código Postal)	
Social Security #: (Número de seguro social)		Date of Birth: (Fecha de Nacimiento)	
Home Phone:		Cell Phone:	
Referred by: _____ Advertisement _____ Walk-in _____ Individual _____ Are you under 18 years of age? Yes ____ No ____ Are you eligible to work in the United States? Yes ____ No ____ Position Applying: _____ Date you can start: _____ *Salary Desired: _____ Are you available to work: Full Time _____, Part Time _____, Weekends _____, Are you willing to travel? _____ Do you have any physical defects that preclude you from performing any work for which you are being considered? Yes ____ No ____ If yes, please explain: _____ ※ In case of emergency notify (Name, Relationship, Phone, Address): _____ Have you been convicted of or pleaded no contest to a felony within the past ten years? Yes ____ No ____ If yes, please explain: _____ _____ _____			

EMPLOYER ONLY! (Empleador sólo) (Comments)

EMPLOYMENT HISTORY (Historial de empleo)

(List below last four employers, starting with last one first)

Company Name:	City & State:
Duties:	From: To:
Phone:	Supervisor Name:
Reason for Leaving:	
Company Name:	City & State:
Duties:	From: To:
Phone:	Supervisor Name:
Reason for Leaving:	
Company Name:	City & State:
Duties:	From: To:
Phone:	Supervisor Name:
Reason for Leaving:	
Company Name:	City & State:
Duties:	From: To:
Phone:	Supervisor Name:
Reason for Leaving:	

REFERENCES (Referencia)

Name	Relationship	Phone	Address

EDUCATION (Educación)

Highest level of education (Check One)	School Name	Years Attended / Graduated
High School / College / Other		

* The age discrimination in employment act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.

I certify that, to the best of my knowledge and belief, the information provided in ordered to complete this application is true, complete and accurate. I understand that false statements, omissions, or misrepresentations on this application may result in rejection of my application or, if employed, may result in my discharge at any time. In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at anytime, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice.

Signature (Firma)

Date (La fecha)