

## EMPLOYMENT APPLICATION FORM

## Applicant Information:

Full Name:				Date of Birth:	
	Last	First	M.I.		
Date of Application:					
				-	
Address:				Phone:	
	Street Add.	Apt/Unit #	_		
				Email:	
	City	State	Zip Code	-	
					\$
Date Available:		Desired Salary:			*
Position Applied For:					

Are you at least 14 years of age? (The PA Child Labor Act requires all minors (ag	es 14-17) to o	btain a worl	c permit.) Yes □	No □	
Are you legally authorized to work in the U.S.?	Yes □	No □			
Are you capable of performing the essential functions of the position with or without accommodations?	Yes □ No	o □ plea:	If applicable, se list all necessary accommodations.		
Have you ever been convicted of a felony?	Yes □	No □	If yes, explain?		
I will be able to work the following shifts: (check all that apply)	Any □	Day □	Night □		
Previous Employment  Please list your most recent employment first ar to this job are listed in this section.	nd include sun	nmer or tem	porary jobs. Ensure all	listed experience	or employers related
Company:			Phone:		
Address:			Supervisor:		
Job title:			From:		To:
Responsibilities:					
May we contact your previous supervisor for a	reference?		Yes □	No □	

Company:	Phone:							
Address:	Supervisor:							
Job title:	From:			To:				
Responsibilities:								
May we contact your previous supervisor for a reference?		Yes □	No □					
Company:	Phone:							
Address:	Supervisor:							
Job title:	From:			To:				
Responsibilities:								
May we contact your previous supervisor for a reference?		Yes □	No □					
Disclaimer and Signature:								
I certify that my answers are true and are complete to the best of my knowledge.								
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.								
Signature: Date	::							