



# APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of nondiscrimination in employment on any basis including race, color, age, sex, religion, disability, or national origin.

**APPLICANTS PLEASE READ THE FOLLOWING:**

- You MUST possess a valid Texas Drivers' License.
- You MUST possess a High School Diploma or GED.
- Incomplete applications will not be considered

Date / /

## Employment Desired

Position	Date You Can Start	Salary Desired	Type of Employment Full-time <input type="checkbox"/> Summer <input type="checkbox"/> Part-time <input type="checkbox"/> Temporary <input type="checkbox"/>
Are you currently employed? YES <input type="checkbox"/> NO <input type="checkbox"/>		If so, may we contact your employer?	

## Personal Information

Last Name	First Name	Middle Name
Address (Number, Street, City, State, ZIP Code)		
Email Address	Home Telephone Number	Referred By

## Education

High School Attended or GED Program	No. of Years Completed	Did You Graduate?	GED
College Attended and Location	No. of Years Completed	Did You Graduate?	Degree
Trade, Business or Correspondence School Attended and Location	No. of Years Completed	Did You Graduate?	Degree
Licenses/Certifications	No. of Years Completed	Expiration Date	Degree

## General

Special Courses or Training
Experience/Skills Related to the Position for Which You Are Applying

## Office/Computer Skills

Skill/Aptitude	Years of Experience	Words Per Minute	Software Used
Typing			
Spreadsheets			
Word Processing			

List any other training which may be helpful in considering your application.

## Employment History (List Present or Most Recent Positions First)

Name of Employer		Address (Number, Street, City, State, ZIP Code)	
Phone	Type of Business	Department	Your Position
Duties			
Name and Position of Immediate Supervisor			
Date Employed (Day, Month, Year)	Date Left (Day, Month, Year)	Starting Salary	Final Salary
Reason for Leaving			

Name of Employer		Address (Number, Street, City, State, ZIP Code)	
Phone	Type of Business	Department	Your Position
Duties			
Name and Position of Immediate Supervisor			
Date Employed (Day, Month, Year)	Date Left (Day, Month, Year)	Starting Salary	Final Salary
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Duties			
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Date Employed (Day, Month, Year)	Date Left (Day, Month, Year)	Starting Salary	Final Salary
Reason for Leaving			

Experience/Skills related to the Position for Which You Are Applying

## Other Experience

In this section, list any job experience not listed above that most directly relates to the job for which you are now applying.

Name of Employer		Address (Number, Street, City, State, ZIP Code)	
Phone	Type of Business	Department	Your Position
Duties			
Name and Position of Immediate Supervisor			
Date Employed (Day, Month, Year)	Date Left (Day, Month, Year)	Starting Salary	Final Salary
Reason for Leaving			

I certify that the information provided is true and correct. I am eligible to work in the United States and at least 18 years of age.

Signature \_\_\_\_\_



### Additional Employment Information

Do you have a current, valid Texas Driver's license? Yes \_\_\_\_ No \_\_\_\_

Do you have a current, valid U.S. Passport? Yes \_\_\_\_ No \_\_\_\_

If you answered no; would you be able to obtain a passport within the first two months of employment? Yes \_\_\_\_ No \_\_\_\_

Have you ever been involuntarily terminated from a position of employment? If so, please explain. (This question does not apply to a layoff or reduction in force for economic reasons.)

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During the past five (5) years, have you been convicted of, or have you pleaded guilty or no contest to, a felony or misdemeanor offense? If yes, please explain. (Answering "yes" to this question will not automatically bar you from employment unless applicable law requires such action.)

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Professional References:

Name	Company Name	Position	Phone Number	Email Address
Name	Company Name	Position	Phone Number	Email Address
Name	Company Name	Position	Phone Number	Email Address
Name	Company Name	Position	Phone Number	Email Address

I certify that I have fully and accurately answered all questions and have given all information requested on this Additional Employment Information Sheet and the previous application for employment you submitted, if applicable, and I understand that any wrong or incomplete information on the forms may disqualify me for further consideration that all such information is subject to verification by the Company, and hereby give my consent to the Company to investigate my background and qualifications using any means, sources, and outside investigators at its disposal. I agree to undergo any type of drug and/or alcohol testing that the Company may require at any time. Finally, I understand that submission of this Additional Employment Information Sheet and the previous application for employment, if applicable, does not necessarily mean that I will be hired, and that if I am hired, my employment will be "At Will," and either I or the Company may terminate my employment at any time, with or without notice or reason."

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name