

# Application for Employment



77 Shoe House Road  
York, PA 17406-8052  
717-755-1033

Position applied for: \_\_\_\_\_ Date of Application: \_\_\_\_\_  
 Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Telephone Number: \_\_\_\_\_ Email \_\_\_\_\_  
 Referral Source (How did you hear about us ) \_\_\_\_\_

Have you ever been employed here before? If yes, give dates & positions \_\_\_\_\_  
 Are you legally eligible for employment in this country? .....  Yes  No  
 Date available for work? \_\_\_\_\_ What is your desired salary? \_\_\_\_\_  
 Type of employment desired:  Full Time  Part-Time Day Evening Night Weekend  
 Drivers license number if driving is a requirement of the position: \_\_\_\_\_ State: \_\_\_\_\_  
 Have you ever pled "guilty" or "no contest" to, or been convicted of a crime? .....  Yes  No  
*Answering "yes" does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.*  
 If yes, please provide date(s) and details:  
 \_\_\_\_\_  
 \_\_\_\_\_

## EMPLOYMENT HISTORY

Starting with your most recent employer, provide the following information.

Employer:	Dates employed:
Address:	Title:
Phone Number:	Starting wage: \$ _____ per
Supervisor name/title:	Ending wage: \$ _____ per
Summarize the type of work performed and job responsibilities:	
May we contact for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Reason for leaving?
Employer:	Dates employed:
Address:	Title:
Phone Number:	Starting wage: \$ _____ per
Supervisor name/title:	Ending wage: \$ _____ per
Summarize the type of work performed and job responsibilities:	
May we contact for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Reason for leaving?

AN EQUAL OPPORTUNITY EMPLOYER

Employer:	Dates employed:
Address:	Title:
Phone Number:	Starting wage: \$                      per
Supervisor name/title:	Ending wage: \$                      per
Summarize the type of work performed and job responsibilities:	
May we contact for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later	Reason for leaving?

### SKILLS AND QUALIFICATIONS

Summarized any special trainings, skills, licenses and/or certifications that may assist you in performing the position for which you are applying.

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### EDUCATIONAL BACKGROUND

Starting with your most recent school attended, provide the following information.

School (include City & State)	Degree/Certification	Major	Did You Graduate?
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

### REFERENCES

List the name and telephone number of **two previous supervisors and one character reference** (who is *not* related to you). **Email is preferred.**

Name	Relationship	Email	Telephone Number	Years Known

**APPLICANT STATEMENT**

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representative, employees or agents to contact and obtain information from all references ,personal and professional, employers, public agencies, licensing authorities and education instructions and to otherwise verify the accuracy of all information provided by me in this application, résumé or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or elimination any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for one year. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and full out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with our without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing expressed language are valid unless they are in writing and signed by the employer’s president.

I also understand that if I am hired, I will be required to provide proof of identify and legal authorization to work in the United States and that federal immigration laws require me to complete and I-9 Form in this regard.

This organization does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state or local law.

I understand that any information provided by me that is found to be false, incomplete or misrepresent in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer’s service, whenever it is discovered.

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.**

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_