



APPLICATION FOR EMPLOYMENT

ALL POTENTIAL EMPLOYEES ARE EVALUATED WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A NON-JOB RELATED HANDICAP OR ANY OTHER LEGALLY PROTECTED STATUS.

Please attach a resume if available and do not duplicate any information provide on the resume.

Position Sought: _____

How did you learn about the position? _____

Name _____ Date _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Office Phone _____ Other Phone _____

Email Address: _____

On what date would you be available for work? _____ Desired Wage/Salary \$ _____

Are you authorized to work in the U.S. without any restriction?

Yes No

Have you ever been convicted of a felony? Yes No If yes, please describes circumstances: _____

Have you ever been involuntarily terminated or asked to resign from any position of employment?

Yes No

If yes, please describes circumstances: _____

If selected for employment, are you willing to submit to a pre-employment drug screening test?

Yes No

Are you willing to travel? Yes No Are you willing to work overtime? Yes No

EDUCATION				
School Name	Location	Years Attended	Degree Received	Major

Other training, certifications, or licenses held: _____

List other information pertinent to the employment you are seeking: _____

EMPLOYMENT – (Most Recent First)

1. Employer _____ Job Title _____
 Dates Employed _____ Prior Position Held within Company (if any): _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Job Title _____ Supervisor _____
 Starting Salary _____ Ending Salary _____
 Duties Performed _____
 Reason for Leaving _____

2. Employer _____ Job Title _____
 Dates Employed _____ Prior Position Held within Company (if any): _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Job Title _____ Supervisor _____
 Starting Salary _____ Ending Salary _____
 Duties Performed _____
 Reason for Leaving _____

3. Employer _____ Job Title _____
 Dates Employed _____ Prior Position Held within Company (if any): _____
 Address _____ City _____ State _____ Zip _____
 Phone _____ Job Title _____ Supervisor _____
 Starting Salary _____ Ending Salary _____
 Duties Performed _____
 Reason for Leaving _____

REFERENCES – Give the names of three persons not related to you, whom you have known at least one year.

NAME	Phone	BUSINESS	YEARS ACQUAINTED
1.			
2.			
3.			

ADDITIONAL INFORMATION

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Divine Brothers Company to verify their accuracy and to obtain reference information on my work performance, character, general reputation and personal characteristics. I hereby release Divine Brothers Company from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information. You have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

Signature of Applicant _____ Date: _____