

# APPLICATION FOR EMPLOYMENT

514 Sixth Avenue  
Dayton, Kentucky 41074



We consider applications for all positions without regard to race, color, religion, creed, sex, national origin, disability, sexual orientation, citizenship status or any other legally protected status.

*(PLEASE PRINT)*

Position(s) Applied For	Date of Application
How Did You Learn About Us?	
<input type="checkbox"/> Advertisement <input type="checkbox"/> Relative <input type="checkbox"/> Inquiry <input type="checkbox"/> Employment Agency <input type="checkbox"/> Friend <input type="checkbox"/> Other _____	

Last Name	First Name	Middle Name
Address	Number	Street
		City
		State
		Zip Code
Telephone Number(s)		Social Security Number (Voluntary)

Best time to contact you at home is: ..... : ..... AM  
PM

If you are under 18 years of age, can you provide required proof of your eligibility to work? .....  Yes       No

Have you ever filed an application with us before? .....  Yes       No

.....If Yes, give date \_\_\_\_\_

Have you ever been employed with us before? .....  Yes       No

    If Yes, give date \_\_\_\_\_

Do any of your friends or relatives, other than spouse, work here? .....  Yes       No

Are you currently employed? .....  Yes       No

May we contact your present employer? .....  Yes       No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status  
*Proof of citizenship or immigration status will be required upon employment.* .....  Yes       No

Date available for work \_\_\_/\_\_\_/\_\_\_    What is your desired salary range? \_\_\_\_\_

Are you available to work:       Full-Time      (please indicate 1 2 3 shift)  
     Part-Time      (please indicate Mornings Afternoon Evenings)  
     Temporary      (please indicate dates available \_\_\_/\_\_\_/\_\_\_ - \_\_\_/\_\_\_/\_\_\_)

Are you currently on "lay-off" status and subject to recall? .....  Yes       No

Can you travel if a job requires it? .....  Yes       No

WE ARE AN EQUAL OPPORTUNITY EMPLOYER



# EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1.	Employer	<b>Dates Employed</b>		<b>Work Performed</b>
		From	To	
	Address			
	Telephone Number(s)	<b>Hourly Rate/Salary</b>		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
2.	Employer	<b>Dates Employed</b>		<b>Work Performed</b>
		From	To	
	Address			
	Telephone Number(s)	<b>Hourly Rate/Salary</b>		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
3.	Employer	<b>Dates Employed</b>		<b>Work Performed</b>
		From	To	
	Address			
	Telephone Number(s)	<b>Hourly Rate/Salary</b>		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			
4.	Employer	<b>Dates Employed</b>		<b>Work Performed</b>
		From	To	
	Address			
	Telephone Number(s)	<b>Hourly Rate/Salary</b>		
		Starting	Final	
	Job Title	Supervisor		
	Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held.

*You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:*

---



---



---



---



---



# APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

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

\_\_\_\_\_  
Date

## FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview  Yes  No

Remarks \_\_\_\_\_  
\_\_\_\_\_

INTERVIEWER DATE

Employed  Yes  No Date of Employment \_\_\_\_\_

Job Title \_\_\_\_\_ Hourly Rate/  
Salary \_\_\_\_\_ Department \_\_\_\_\_

By \_\_\_\_\_  
NAME AND TITLE DATE

**FOR PERSONNEL DEPARTMENT USE ONLY**

Position(s) Applied For Is Open:  Yes  No

Position(s) Considered For: \_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_

NAME: \_\_\_\_\_

POSITION: \_\_\_\_\_

DATE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_