



# Employment Application

An Equal Opportunity Employer

Please Print

Date \_\_\_\_\_ Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_

### Present Address:

No. & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

### Permanent Address (if different from present address):

No. & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Business Phone \_\_\_\_\_ Home Phone \_\_\_\_\_ Email Address \_\_\_\_\_

### Employment Desired

Position applying for: \_\_\_\_\_

Are you applying for?

Regular full-time work?  Yes  No

Regular part-time work?  Yes  No

Temporary work, e.g., summer or holiday work?  Yes  No

Other than time off for reasons related to your religion, a disability or medical condition, are there any days or times when you are unavailable to work?

\_\_\_\_\_

If applying for temporary work, during what period of time will you be available?

From: \_\_\_\_\_ To: \_\_\_\_\_

Would you be available to work overtime, if necessary?  Yes  No

If hired, what date can you start work?

\_\_\_\_\_

# Employment Application

## Personal Information

How did you hear about our company and this job opening?

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Have you ever applied to or work for Andreini & Company before?  Yes  No

If yes, when? \_\_\_\_\_

Why are you applying to work at Andreini & Company?

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If hired, would you have a reliable means of transportation to and from work?  Yes  No

Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age)  Yes  No

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?  Yes  No

If no, describe the functions that cannot be performed.

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(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)

We may refuse to hire relatives of present employees if doing so could result in actual or potential problems in supervision, security, safety or morale or if doing so could create conflicts of interest.

## Education, Training, and Experience

| High School | Name/Address | No. of Years Completed | Did you graduate?  | Degree or Diploma |
|-------------|--------------|------------------------|--|-------------------|
|             | _____        | _____                  | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____             |
| College     | Name/Address |                        | Did you graduate?  |                   |
|             | _____        | _____                  | <input type="checkbox"/> Yes <input type="checkbox"/> No | _____             |

Do you have any other experience, training, qualifications or skills that you feel make you especially suited for work at Andreini & Company?  Yes  No

If yes, please explain

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## Employment Application

Answer the following questions if you are applying for a professional position:

Are you licensed/certified for the job applied for?

Yes  No

Name of license/certification: \_\_\_\_\_

Issuing State: \_\_\_\_\_

License/certification number: \_\_\_\_\_

Has your license/certification ever been revoked or suspended?

Yes  No

If yes, state reason(s), date of revocation or suspension, and date of reinstatement: \_\_\_\_\_

### Employment History

List below all present and past employment starting with your most recent employer (last 10 years is sufficient). You must complete this section even if attaching a resume.

Name of Employer

Phone Number

\_\_\_\_\_

\_\_\_\_\_

Type of Business

Your Supervisor's Name

\_\_\_\_\_

\_\_\_\_\_

Address & Street

City

State

Zip Code

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dates of Employment

From \_\_\_\_\_ To \_\_\_\_\_

Your position and Duties

\_\_\_\_\_

Reason for Leaving

\_\_\_\_\_

Current employer?

Yes  No

May we contact this employer for reference?

Yes  No

Name of Employer

Phone Number

\_\_\_\_\_

\_\_\_\_\_

Type of Business

Your Supervisor's Name

\_\_\_\_\_

\_\_\_\_\_

Address & Street

City

State

Zip Code

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# Employment Application

Dates of Employment

From \_\_\_\_\_ To \_\_\_\_\_

Your position and Duties

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Reason for Leaving

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Current employer?  Yes  No

May we contact this employer for reference?  Yes  No

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Name of Employer \_\_\_\_\_ Phone Number \_\_\_\_\_

Type of Business \_\_\_\_\_ Your Supervisor's Name \_\_\_\_\_

Address & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Dates of Employment

From \_\_\_\_\_ To \_\_\_\_\_

Your position and Duties

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Reason for Leaving

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Current employer?  Yes  No

May we contact this employer for reference?  Yes  No

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Name of Employer \_\_\_\_\_ Phone Number \_\_\_\_\_

Type of Business \_\_\_\_\_ Your Supervisor's Name \_\_\_\_\_

Address & Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

# Employment Application

Dates of Employment

From \_\_\_\_\_ To \_\_\_\_\_

Your position and Duties

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Reason for Leaving

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Current employer?  Yes  No

May we contact this employer for reference?  Yes  No

## References

List below three persons not related to you who have knowledge of your work performance within the last three years.

|                  |                         |              |          |
|------------------|-------------------------|--------------|----------|
| First Name       | Last Name               | Phone Number |          |
| _____            | _____                   | _____        |          |
| Address & Street | City                    | State        | Zip Code |
| _____            | _____                   | _____        | _____    |
| Occupation       | No. of Years Acquainted |              |          |
| _____            | _____                   |              |          |
| First Name       | Last Name               | Phone Number |          |
| _____            | _____                   | _____        |          |
| Address & Street | City                    | State        | Zip Code |
| _____            | _____                   | _____        | _____    |
| Occupation       | No. of Years Acquainted |              |          |
| _____            | _____                   |              |          |
| First Name       | Last Name               | Phone Number |          |
| _____            | _____                   | _____        |          |
| Address & Street | City                    | State        | Zip Code |
| _____            | _____                   | _____        | _____    |
| Occupation       | No. of Years Acquainted |              |          |
| _____            | _____                   |              |          |

## Employment Application

Please Read Carefully, Initial Each Paragraph and Sign Below

|                      |   |
|----------------------|---|
| <p>____ Initials</p> | <p>I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.</p>   |
| <p>____ Initials</p> | <p>I hereby authorize Andreini &amp; Company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment (excluding criminal background information) unless otherwise specified above. I further authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.</p> |
| <p>____ Initials</p> | <p>I understand that nothing contained in the application or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.</p>   |
| <p>____ Initials</p> | <p>In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.</p>   |

The Company will consider qualified applicants, including those with criminal histories, in a manner consistent with state and local "Fair Chance" laws.

Date

Applicants Signature

\_\_\_\_\_

\_\_\_\_\_