



APPLICATION FOR EMPLOYMENT

It is our policy to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental handicap, or veteran status.

Name/Nombre: Last _____ First _____ Middle _____ Date _____

Street Address/Dirección de la calle _____

City/Ciudad _____ State /Estado _____ Zip _____

Telephone/Teléfono _____ Social Security/Seguridad Social# / TIN # XXX-XX-XXXX

Position applied for/Colocar aplicado para? _____

How did you hear of this opening/Cómo oíste hablar de esta abertura? _____

When can you start/Cuando poder comienzas _____ Date of Birth: _____

Are you a U.S. citizen or otherwise authorized to work in the [] Yes [] No U.S. on an unrestricted basis? / Eres autorizaste para trabajar en los Estados Unidos?[] Yes [] No

Are you able to Speak & Read English? [] Yes [] No; Are you able to Speak & Read Spanish? [] Yes [] No

How many hours a week would you like to work/Cuántas horas a la semana tienes gusto de trabajar? _____

Do you prefer to work Mornings/¿Prefieres trabajar mañanas? [] Afternoons? /¿Tardes? [] Evenings?/¿Tardes? []

Can you work weekends?/¿Puedes trabajar fines de semana? [] Yes [] No

Do you have reliable transportation to get to work?/¿Tienes transporte confiable a conseguir trabajar? [] Yes [] No

Have you ever been convicted of a felony? [] Yes [] No

If yes, please fully describe the circumstances: _____

Education/Educación : School Name and Location Year Major Degree

High School _____

College _____

Other _____

In addition to your work history, are there are other skills, qualifications, or experience we should consider?

Employment History/ Historia de empleo: (Start with most recent employer.)

Company name/ Nombre de compañía _____

Address/ Dirección _____ Telephone/Teléfono _____

Date Started/ Fecha comenzada _____ Starting Wage/ Comenzar el salario _____ Starting Position _____

Date Ended / La fecha terminó _____ Ending Wage/ Salario del conclusión _____ Ending Position _____

Name of Supervisor/ Nombre del supervisor _____ May we contact?/¿Podemos entrar en contacto con?
[] Yes [] No

Responsibilities/Responsabilidades: _____

Reason for leaving/Razón de irse _____

Company name/ Nombre de compañía _____

Address/ Dirección _____ Telephone/Teléfono _____

Date Started/ Fecha comenzada _____ Starting Wage/ Comenzar el salario _____ Starting Position _____

Date Ended / La fecha terminó _____ Ending Wage/ Salario del conclusión _____ Ending Position _____

Name of Supervisor/ Nombre del supervisor _____ May we contact?/¿Podemos entrar en contacto con?
[] Yes [] No

Responsibilities/Responsabilidades: _____

Reason for leaving/Razón de irse _____

Attach additional information if necessary./ Unir la información adicional en caso de necesidad.

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history. I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment will continue on that basis. I understand that no supervisor, manager, or executive of this company, other than the president has the authority to alter the foregoing. I understand that if hired, use of, possession of or distribution of illegal substances shall result in immediate termination of employment.

Signature /Firma _____ Date/Fecha _____