

EMPLOYMENT APPLICATION



APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available:	Social Security No.	Desired Salary: \$	per hour
Where did you find out about the job opening(s) at Powderhorn?			
Position Applied for:			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain
Are you 18 years old or older?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	

EDUCATION	
High School	Address
Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College	Address
Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other	Address
Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Special Skills:	Special Study or Research Work:

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

EMPLOYMENT HISTORY, STARTING WITH MOST CURRENT

Company		Phone ()	
Address			
Job Title		Starting Salary \$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address			
Job Title		Starting Salary \$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address			
Job Title		Starting Salary \$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE

Branch Rank at Discharge

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or with notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than it's President, and then only when in writing and signed by the President, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing.

Signature

Date