



Application for Employment
Equal Opportunity Employer

Please Type or Neatly Print All Responses in Blue or Black Ink on This Application

Last Name:	First:	MI:	Social Security Number:	Position Applied For:
Current Address:			E-mail Address:	Referred By:
City:	State:	Zip:	Telephone Number:	Alternate Telephone Number:

What Kind of Work Schedule Are You Available For at This Time: Full Time _____ Part Time _____ Temporary/Seasonal _____ On-Call _____

Would You be Available to Work Weekends and Holidays if Required by Your Position? Yes _____ No _____

What is your Shift Preference, If Applicable? Day _____ Afternoon _____ Night _____

Education

Name of High School, College, Trade or Technical School	City, State	Indicate Major and Minor or Course Emphasis	Did you Graduate (yes or no?)	Indicate Diploma, GED, Degree, License and/or Certification Received

Are you currently authorized to work in the United States (U.S. Citizen, or Permanent Resident Alien authorized for employment)?

Are you at least 18 years of age? Yes _____ No _____

Have you ever served on active duty in the military? Yes _____ No _____

Are you now or have you ever been a member of any reserve or National Guard Organization? Yes _____ No _____

In the space provided, list other pertinent training or skills you have received (in High School, College, U.S. Armed Forces, Workshops or other special courses) such as Alcohol Training, Bartending School, ServSafe, etc.

Have you ever been convicted of a felony? Yes _____ No _____

If yes, list each, giving date, nature of offense or violation, name and location of court, the penalty imposed, if any, or the disposition of the case.

A conviction will not automatically bar you from employment.

Work Experience

In the space provided below give a record of all employment. Start with your most recent job and work backwards. ***Please indicate the name you used if it is different than that given on this application***

Dates of Employment Month/Year	Title /Position	Starting Pay \$	Ending Pay \$	Number of Hours/Week	Describe Duties & Responsibilities
	Employer Name & Full Mailing Address:				
*Previous Name Used	Immediate Supervisor Name & Title			Phone Number	Reason for Leaving:

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References

In the space provided below list the names of three persons in the United States who are not related to you, preferably persons with whom you have worked, who have knowledge of your qualifications for the position you are applying for.

Full Name	Complete business or home address	Type of business or Occupation	Telephone Number

I certify that the answers and information given by me in this application are true, correct and complete without qualification. I understand that Packard Pub has the right to refuse to hire or subject me to discipline at any time, if it discovers that the information and/or answers that I have provided in this application for employment, including any resume that I may have submitted, are true, correct and/or complete. I hereby authorize Packard Pub to verify the answers and information given by me in this application and supporting documentation, and to make any lawful investigation of my employment background it deems necessary. I authorize former employers (except where authorization has not been expressly given), law enforcement organizations, credit bureaus, educational institutions, and references contacted by Packard Pub to release any information they have regarding me and Packard Pub has no obligation to provide written notice to me. I acknowledge that a facsimile or copy of this Authorization shall be as valid as the original. I authorize Packard Pub to use the information in its possession concerning me for any lawful purpose it deems appropriate, including disclosure of lawful information to future employers or prospective future employers, without notification to me of such disclosure, and I release Packard Pub from any liability in connection with such lawful use or disclosure.

Applicant's Signature _____ Date _____

Printed Name _____