

Date of Application:	
Name:	Social Security #:
Current Address:	Zip:
Telephone Number: Cell:	: Date of Birth:
Are you currently a student? Where?	Current GPA:
School Activities:	
Hours & Days Available:	
Previous Employment: (Please include telephone #s,	, addresses, time employed, and wages received.)
1	
2	

I certify that the answers given herein are true and complete to the best of my knowledge. 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 this 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 the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. 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

Date of Interview: \_\_\_\_\_

Date Hired: \_\_\_\_\_

Starting Pay:

Date of Termination: \_\_\_\_\_