



260-768-4725

www.riegsecker.com

APPLICATION FOR EMPLOYMENT

COMPLETE FRONT & BACK - ANSWER ALL QUESTIONS - PLEASE PRINT

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, or disability, as defined by federal law. If you have a disability which may require special testing, please notify a Company Representative.

GENERAL INFORMATION

Today's Date _____ Position Desired _____ Date you can start _____ Salary desired _____

Have you filed an application or worked here before? Yes No If so, when? _____ / where? _____

Are you currently employed? Yes No If so, may we contact your present employer? Yes No

Referral Source: Advertisement where? _____ Friend/Relative who? _____

Employment Agency where? _____ Other _____

PERSONAL INFORMATION

NAME _____
Last First Middle

ADDRESS _____
Street City State Zip

PHONE _____ SOCIAL SECURITY NO. _____ DRIVER'S LICENSE NO. _____
(Type of license, CDL, etc.)

In case of accident or emergency, please notify: _____ EMAIL ADDRESS _____

Name Address Phone Number

- Are you legally eligible to work in the United States on an unrestricted basis? Yes No
- Are you available to work: Full Time Part Time Days Evenings Nights Saturdays Holidays
- Are you under 18 years of age? Yes No If yes, what is your birth date? _____
Month Day Year
- Have you ever been convicted of a crime? Yes No
If yes, describe in full, including date(s) _____
(Conviction will not automatically disqualify applicant from employment)
- Do you have any reason to believe that you could not perform the essential tasks of the job for which you are being considered with or without reasonable accommodation? Yes No If yes, please explain _____
(Employment discrimination is prohibited on the basis of a disability as that term is defined by federal law)

REFERENCES

Give name, address, and phone number of three references not related to you.

1. _____
2. _____
3. _____

EMPLOYMENT EXPERIENCE

List each job held. Start with your present or last job. Include military service assignments and volunteer activities.

Date	Name, Address and Phone Number of Employer	Hourly Rate / Salary Starting - Final	Job Title - Work Performed	Super-visor	Reason for Leaving
From/To					
From/To					
From/To					
From/To					
From/To					

If you need additional space, please continue on a separate sheet of paper.

What other experiences, special skills, and qualifications acquired from employment would especially prepare you for work with our company? _____

EDUCATION

Please circle years completed and list the name of schools you attended.

Elementary School / Years Completed 5 6 7 8
 Name: _____
 College/University / Years Completed 1 2 3 4
 Name: _____ Degree: _____

High School Years Completed 9 10 11 12
 Name: _____
 Graduate/Professional Years Completed 1 2 3 4
 Name: _____ Degree: _____

Other pertinent information concerning scholastic performance including honor societies, scholarships, awards, and other academic accomplishments. (You may exclude those that indicate race, color, religion, sex, national origin, age, marital status, disability, or veteran *status*.)

Describe specialized training, licenses/certifications, apprenticeship skills, and extra-curricular activities _____

APPLICANT'S STATEMENT

I certify that the answers given herein are true and complete. I agree to inform the Company of any additional information relating to questions raised on the application which occur subsequent to my completion of the application. I authorize investigation of all statements contained in this application for employment. I hereby authorize anyone of whom request is made to supply to the Company any information concerning my background in connection with my being considered for employment with the Company. I hereby release all parties, including but not limited to the Company, my personal references and my previous employers, from any and all liability for any injury or damage that may result from their furnishing information to the Company concerning me or any action the Company takes on the basis of such information. If I leave the employ of this Company, I authorize the Company to release information regarding my performance, previous schools, employers, addresses where resided and references which may be used in determining my employment eligibility with a new employer. I understand that this application will remain in effect for only ninety (90) days from the date set forth below and will not be actively considered by the Company after such period. I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract for either employment or for the providing of any benefit. No promises regarding employment have been made to me and I understand that no such promise is binding unless made in writing. If an employment relationship is established, I understand that I have the right to terminate my employment at any time, and that the Company and its agents retain a similar right.

Signature of Applicant _____

Date _____