

Application for Employment

Applicant: Thank you for your interest in our organization. HDL is an equal opportunity employer and does not discriminate on the basis of race, color, creed, religion, national origin, sex, age, marital status, public assistance status, veteran status, disability or sexual orientation, or any other characteristic prohibited by law. To enable us to properly evaluate this application, please answer all questions carefully and as completely as possible.

PLEASE PRINT

Position(s) applied for: _____ Date of Application: _____

Salary/wage desired: _____

Last Name:	First Name:	Middle Name:
Address:		
City:	State:	Zip Code:
Telephone Numbers: Home: _____ Cell: _____		
Email Address:		

Are you 18 years of age or older? ☐ Yes ☐ No

Have you ever filed an application with us before? ☐ Yes ☐ No

If Yes, give date _____

Have you ever been employed with us before? ☐ Yes ☐ No

If Yes, give date _____

Are you currently employed? ☐ Yes ☐ No

May we contact your present employer? ☐ Yes ☐ No

On what date would you be available for work? _____

Are you available to work: ☐ Full Time or ☐ Part Time ☐ Permanent or ☐ Temporary

Are you currently on "lay-off" status and subject to recall? ☐ Yes ☐ No

Can you travel if a job requires it? ☐ Yes ☐ No

WE ARE AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

Applicant please read carefully: Please answer all questions on this form to the best of your ability. Your qualifications will be carefully reviewed and you will be given thorough consideration for any suitable vacancies in the organization. If you are employed, this will become a part of your permanent personnel record. Keep this in mind as you fill it out. We appreciate your interest as shown by you filling out this application blank. This information will be kept in strict confidence.

Education

	Elementary / Middle School					High School				Undergraduate College / University				Other			
School name and location:																	
Years Completed	4	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Diploma / Degree																	
Describe any specialized training, apprenticeship, skills and extracurricular activities																	
State any additional information you feel may be helpful to us in considering your application																	

List professional, trade, business or civic activities and offices held.
You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status:

Have you ever had any job-related training in the United States military?

☐ Yes☐ No

If Yes, please describe:

Is there anything that would prevent you from performing the essential functions of the job(s) applied for?

References

Give name, address and telephone number of three references who are not related to you and who have personal knowledge of your qualifications.

1.

2.

3.

Employment Experience

Please provide information covering your complete employment experience, including time spent in military service, if any. Be accurate and account for ALL of your time. Applications may be rejected if incomplete. Use the comments area at the end of this section on Experience to account for any gaps in your experience. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status. List your present or most recent employer first.

1.	Employer:		Dates Employed		Describe Specifically Work Performed
			From	To	
	Address:				
	Telephone Number(s):		Hourly Rate/Salary		
			Starting	Final	
Job Title:		Supervisor:			
Reason for Leaving:					
2.	Employer:		Dates Employed		Describe Specifically Work Performed
			From	To	
	Address:				
	Telephone Number(s):		Hourly Rate/Salary		
			Starting	Final	
Job Title:		Supervisor:			
Reason for Leaving:					
3.	Employer:		Dates Employed		Describe Specifically Work Performed
			From	To	
	Address:				
	Telephone Number(s):		Hourly Rate/Salary		
			Starting	Final	
Job Title:		Supervisor:			
Reason for Leaving:					
4.	Employer:		Dates Employed		Describe Specifically Work Performed
			From	To	
	Address:				
	Telephone Number(s):		Hourly Rate/Salary		
			Starting	Final	
Job Title:		Supervisor:			
Reason for Leaving:					
5.	Employer:		Dates Employed		Describe Specifically Work Performed
			From	To	
	Address:				
	Telephone Number(s):		Hourly Rate/Salary		
			Starting	Final	
Job Title:		Supervisor:			
Reason for Leaving:					

I hereby give permission to contact the employers listed above for any relevant information.

Signature of Applicant: _____ Date: _____

If there is(are) any employer(s) listed above you do not wish us to contact, please indicate.

If you need additional space, please continue on back of last page.

Comments on Work Experience

Summarize special job-related skills and qualifications acquired from employment or other experience.

What types of machines and equipment can you operate?

Applicant's Statement

I certify that 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, and I grant permission to pursue all information in regards to my past employment and any other information that 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 90 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 that 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 that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by the company President or Vice President.

In the event of employment, I understand that false or misleading information given in my application or interview(s) is cause for rejection of this application or 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: _____