

Work		
Location	l	Rate
Primary Job		
Code		Date of
2nd		
3rd		Hire
4th		

## EMPLOYMENT APPLICATION (Short Form)

Position(s) applied for

Were you previously employed by us? Yes\_\_\_\_\_No\_\_\_\_If yes, when?

If your application is considered favorably, on what date will you be available for work?

TO APPLICANT: We deeply appreciate your interest in our organization. Thank you for taking the time to complete this application.

The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex or national origin. Federal law also prohibits other types of discrimination such as age, citizenship, disability, veteran status, attainment of benefits, and participation in union activities. The laws of most states and many localities also prohibit some or all of the above types of discrimination as well as some additional types including, but not limited to, discrimination based upon ancestry, marital status, parental status, sexual orientation, or source of income. The Fair Credit Reporting Act imposes restrictions with respect to information obtained from a consumer reporting agency, including but not limited to information regarding credit data, personal character, general reputation and mode of living. This list, however, is not exhaustive of the grounds on which discrimination is prohibited.

## (PLEASE PRINT CLEARLY)

## **PERSONAL:**

Date				
Name				
Last	First		Middle	
Email Address		Telephone No.		
Address				
No. Street		City	State	Zip Code
Are you legally eligible for employment If hired, you are required to submit proo				
	No	If no, hire is subject to v		
Are you willing to work: Evenings? Ye	No	If no, hire is subject to v		
Are you willing to work: Evenings? Ye	No	If no, hire is subject to v Weekends? Yes		/s? YesNo
Are you willing to work: Evenings? Ye	No	If no, hire is subject to v _ Weekends? Yes Describe any ot	NoHoliday	/s? YesNo
	No esNo	If no, hire is subject to v _ Weekends? Yes Describe any ot	NoHoliday	rs? YesNo

I. Name and Address of Company and Type of Business	From Mo. Yr.	To Mo. Yr.	Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Describ	e the work y	ou did:			
Telephone #						
II. Name and Address of Company and Type of Business	From Mo. Yr.	To Mo. Yr.	Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Describ	e the work y	ou did:			
Telephone #	_					
hereby give permission to contact the e	mployers listed	d above conc	erning my pr	ior work expe	rience as indicated	1.
Employer I? YesNo	Employe	er II? Yes_	No	_		
Signed						
REFERENCES (Business/Professio	nal): Family n	nembers, sig	nificant other	and close pers	sonal friends are n	ot acceptable.
Name Relation	ship to Applica	ant	Telephone No	. 00	ccupation	Years Known
What is the best time to follow-up on this	application	t home?				
s there a second contact number you car						
LEGAL:						
PLEASE READ AND SIGN BELC The facts set forth in my application	on for emplo					
alse statement on this application nd is not intended to be a contra- f the employer decides to employ erminated by either party with or	ct of employ me. I under without no	rment, nor stand and tice, at any	does this a agree that time, for a	pplication of my employ of the my employ of the my reason	bbligate the em ment is at-will or no reason. N	ployer in any v and can be o one other th
_	-	-	•			
n officer of the Cedar Rapids Cou ny specified period of time or to igned by an officer.	-	-	•			