

Personal Information:

Last: _____ First: _____ Middle: _____ Application Date: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Have you ever applied for employment with us?

Yes No If Yes: (Month/Year) _____ Location _____

Position Desired: _____

Apart from absence for religious observance, are you available for full-time work?

Yes No If not, what hours can you work? _____

Are you legally eligible for employment in the United States? Yes No

When are you available to begin work? _____

Will You Work Overtime if asked? Yes No

Have you ever been bonded? Yes No If yes, with what employers? _____

Do you have a valid drivers license? Yes No If yes, what state? _____

Have you been convicted of any crimes in the past 10 years, excluding misdemeanors and summary offenses, which have not been annulled, expunged or sealed by a court? **A conviction record will not necessarily be a bar to employment. Factors such as job relations and seriousness and nature of violation will be taken into account.**

Yes No

If Yes, please describe in full: _____

Other special training or skills (languages, machine operation, etc.): _____

Education:

School	Name & Location:	Course of Study:	# of years completed:	Did you graduate:	Degree/Diploma:
Graduate:					
College:					
Business/Trade or Technical:					
High School:					
Elementary:					

Previous Employment:

Please give accurate, complete full-time and part-time employment starting with your most recent employer.

Company Name: _____	Telephone: _____
Address: _____	Employed: _____
City: _____ State: _____ Zip: _____	From _____ To _____
Job Title: _____	Pay (Weekly): _____
Supervisor's Name: _____	Start: _____ End: _____
Brief Description of Job Duties: _____	Reason for leaving: _____
_____	_____
_____	_____

Company Name: _____	Telephone: _____
Address: _____	Employed: _____
City: _____ State: _____ Zip: _____	From _____ To _____
Job Title: _____	Pay (Weekly): _____
Supervisor's Name: _____	Start: _____ End: _____
Brief Description of Job Duties: _____	Reason for leaving: _____
_____	_____
_____	_____

Company Name: _____	Telephone: _____
Address: _____	Employed: _____
City: _____ State: _____ Zip: _____	From _____ To _____
Job Title: _____	Pay (Weekly): _____
Supervisor's Name: _____	Start: _____ End: _____
Brief Description of Job Duties: _____	Reason for leaving: _____
_____	_____
_____	_____

Company Name: _____	Telephone: _____
Address: _____	Employed: _____
City: _____ State: _____ Zip: _____	From _____ To _____
Job Title: _____	Pay (Weekly): _____
Supervisor's Name: _____	Start: _____ End: _____
Brief Description of Job Duties: _____	Reason for leaving: _____
_____	_____
_____	_____

May we contact all the employers listed above? Yes No
If No, please specify which ones we can contact _____

Military:

Have you served in the Armed Forces? Yes No
If Yes, in what Branch? _____

Please describe any training received relevant to the position for which you are applying:

Job Application

Additional Information:

Membership in professional and civic organizations, special accomplishments, awards, etc.
(Please exclude those which may disclose your race, color, religion, age, disability, sex, or national origin.)

Applicant's Signature:

Please read and understand this statement before signing your application:

The information I have provided in this Application for Employment is true, correct and complete. False, incomplete or misrepresented information of any kind, will be sufficient cause for my application to be rejected or, if discovered after I am employed, cause for immediate termination of my employment.

I authorize the employer to contact and obtain information about me from previous employers, education institutions and "references" I provided, and any other party necessary to verify the accuracy of information I discussed in this application, a related employment resume or a personal interview. To assist in the processing of my application, I waive all rights and claims I may otherwise have against the employer or its representatives, for seeking, and using information to evaluate my employment request and all other persons, corporations or organizations who provide information for this purpose.

This application will expire in 30 days. After that date, unless otherwise notified, I understand that my status as an applicant will end. I may re-apply for employment in the future by completing a new application.

This application is not an employment agreement. If I accept an offer of employment I understand employment is at-will and the employer may terminate my employment at any time, with or without cause and without prior notice, unless required by law. I understand that no one, other than an executive officer of the employer, has authority to enter into any employment agreement with terms contrary to the foregoing and then only in writing signed by such officer.

Indigo Signworks, Inc. is an Equal Opportunity Employer. It is our policy to recruit the most qualified candidate for employment. All qualified applicants, who are eligible for employment, will be considered without regard to race, color, religion, age, disability, sex, national origin, or any other equally protected status under federal, state or local laws.

I fully understand and accept all terms and conditions in the above statement.

Signature

Date

Reference Checks

Employer:	Person Contacted:	Notes:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Test Results

Tests Administered:	Raw Score:	Rating:	Analysis/Comments:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Interview Results
