



Employment Application

An Equal Opportunity Employer

Please Print

Date _____ Last Name _____ First Name _____ Middle _____

Present Address:

No. & Street _____ City _____ State _____ Zip Code _____

Permanent Address (if different from present address):

No. & Street _____ City _____ State _____ Zip Code _____

Business Phone _____ Home Phone _____ Email Address _____

Employment Desired

Position applying for: _____

Are you applying for?

Regular full-time work? Yes No

Regular part-time work? Yes No

Temporary work, e.g., summer or holiday work? Yes No

Other than time off for reasons related to your religion, a disability or medical condition, are there any days or times when you are unavailable to work?

If applying for temporary work, during what period of time will you be available?

From: _____ To: _____

Would you be available to work overtime, if necessary? Yes No

If hired, what date can you start work?

Salary Expectations: \$ _____ HR _____ YR _____

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Personal Information

How did you hear about our company and this job opening?

Have you ever applied to or work for Andreini & Company before? Yes No

If yes, when? _____

Why are you applying to work at Andreini & Company?

If hired, would you have a reliable means of transportation to and from work? Yes No

Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age) Yes No

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? Yes No

If no, describe the functions that cannot be performed.

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)

We may refuse to hire relatives of present employees if doing so could result in actual or potential problems in supervision, security, safety or morale or if doing so could create conflicts of interest.

Education, Training, and Experience

High School	Name/Address	No. of Years Completed	Did you graduate?	Degree or Diploma
	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
College	Name/Address		<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
	_____	_____		_____

Do you have any other experience, training, qualifications or skills that you feel make you especially suited for work at Andreini & Company? Yes No

If yes, please explain

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Answer the following questions if you are applying for a professional position:

Are you licensed/certified for the job applied for?

Yes No

Name of license/certification: _____

Issuing State: _____

License/certification number: _____

Has your license/certification ever been revoked or suspended?

Yes No

If yes, state reason(s), date of revocation or suspension, and date of reinstatement: _____

Employment History

List below all present and past employment starting with your most recent employer (last 10 years is sufficient). You must complete this section even if attaching a resume.

Name of Employer

Phone Number

Type of Business

Your Supervisor's Name

Address & Street

City

State

Zip Code

Dates of Employment

From _____ To _____

Your position and Duties

Reason for Leaving

Current employer?

Yes No

May we contact this employer for reference?

Yes No

Name of Employer

Phone Number

Type of Business

Your Supervisor's Name

Address & Street

City

State

Zip Code

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Dates of Employment

From _____ To _____

Your position and Duties

Reason for Leaving

Current employer? Yes No

May we contact this employer for reference? Yes No

Name of Employer _____ Phone Number _____

Type of Business _____ Your Supervisor's Name _____

Address & Street _____ City _____ State _____ Zip Code _____

Dates of Employment

From _____ To _____

Your position and Duties

Reason for Leaving

Current employer? Yes No

May we contact this employer for reference? Yes No

Name of Employer _____ Phone Number _____

Type of Business _____ Your Supervisor's Name _____

Address & Street _____ City _____ State _____ Zip Code _____

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Dates of Employment

From _____ To _____

Your position and Duties

Reason for Leaving

Current employer? Yes No

May we contact this employer for reference? Yes No

References

List below three persons not related to you who have knowledge of your work performance within the last three years.

First Name _____ Last Name _____ Phone Number _____

Address & Street _____ City _____ State _____ Zip Code _____

Occupation _____ No. of Years Acquainted _____

First Name _____ Last Name _____ Phone Number _____

Address & Street _____ City _____ State _____ Zip Code _____

Occupation _____ No. of Years Acquainted _____

First Name _____ Last Name _____ Phone Number _____

Address & Street _____ City _____ State _____ Zip Code _____

Occupation _____ No. of Years Acquainted _____

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Please Read Carefully, Initial Each Paragraph and Sign Below

____ Initials	I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.
____ Initials	I hereby authorize Andreini & Company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment (excluding criminal background information) unless otherwise specified above. I further authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.
____ Initials	I understand that nothing contained in the application or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the Company and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.
____ Initials	In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

The Company will consider qualified applicants, including those with criminal histories, in a manner consistent with state and local "Fair Chance" laws.

Date

Applicants Signature
