



Equal access to programs, services, and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for _____ Date of application ____/____/____
Name _____ Social Security # _____
Address _____
Telephone# (____) _____ Mobile/Beeper/Other # (____) _____ E-mail Address _____
Referral Source (How did you hear about us) _____

If you are under 18, and it is required, can you furnish a work permit? _____ Yes No
If no, please explain _____
Have you ever been employed before? If yes, give dates and position _____ Yes No
Are you legally eligible for employment in this country? _____ Yes No
Date available for work ____/____/____ What is your desired salary range? _____ \$ _____
Type of employment desired Full Time Part Time Temporary Seasonal Educational Co-Op
Driver's License number if driving may be required in position for which you are applying _____ State _____
Answering "yes" to the following questions does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.
Have you ever pled "guilty" or "no contest" to, or been convicted of a crime? _____ Yes No
If yes, please provide date(s) and details _____

Employment History

Starting with your most recent employer, provide the following information.

Employer (Telephone #) Dates employed Month / Year to Month / Year
Street address City State Compensation (Starting)
Starting job title/final job title Compensation (Final)
Immediate supervisor and title (for most recent position held) May we contact for reference?
Why did you leave?
Summarize the type of work performed and job responsibilities.
What did you like most about your position?
What were things you liked least about the position?
(Repeat for multiple employers)

Skills and Qualifications

5920 South I-35E, Corinth, Texas 76210 • Tel: 940.498.5000 • Fax: 940.498.5008 • www.americaneaglehd.com

Summarize any special training skills, licenses and/or certificates that may assist you in performing the position for which you are applying.

Computer Skills (Check appropriate boxes. Include software titles and years of experience.)

- Word Processing _____ Years: _____ E-mail _____ Years: _____
- Spreadsheet _____ Years: _____ Internet _____ Years: _____
- Presentation _____ Years: _____ Other _____ Years: _____

Educational Background

Starting with your most recent school attended, provide the following information.

School (include City & State)	Years Completed	Completed	GPA Class Rank	Major/Minor
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree <input type="checkbox"/> Certification <input type="checkbox"/> Other		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree <input type="checkbox"/> Certification <input type="checkbox"/> Other		
		<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Degree <input type="checkbox"/> Certification <input type="checkbox"/> Other		

References

List name and telephone number of three business/work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

Name	Title	Relationship to you	Telephone	Number of Years Known
			()	
			()	
			()	

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resumé or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ **Date** ____/____/____