



## Employment Application

***Please Print All Information***

Position Applying For \_\_\_\_\_ Location \_\_\_\_\_ Date \_\_\_\_\_

AN EQUAL OPPORTUNITY EMPLOYER - We consider applicants for all positions on the basis of qualifications and without regard to race, religion, color, sex, gender identity or expression, sexual orientation, national origin, ancestry, citizenship status, uniform service member status, marital status, pregnancy, age, a diagnosis or history of cancer, disability, genetic characteristics or any other category protected by applicable federal, state, or local laws.

How did you learn about the company? (check one)

Advertisement    Friend    Walk-in    Current Employee    Other: \_\_\_\_\_

P E R S O N A L	Name _____			
		Last	First	Middle
	Address _____			
		Street	City	State      Zip
	Telephone No. _____		Email Address _____	
	Have you ever applied to or worked for this company?      Yes _____ No _____			
	If yes, when and where? _____			
	Do you have any friends or relatives working for this company?      Yes _____ No _____			
	If yes, state name(s) and relationship: _____			
	If you are under 18 years of age, can you provide required proof of your eligibility to work (e.g. authorized working papers)?      Yes _____ No _____			
Have you been convicted of a crime in the previous 7 years?      Yes _____ No _____				
<i>(We do not automatically disqualify candidates with criminal convictions.)</i>				
If yes, provide details: _____				
Are you legally qualified to work in the United States?      Yes _____ No _____				
<i>(Under federal law, we must require proof of your identity and employment authorization upon employment.)</i>				

A V A I L A B I L I T Y	If hired, on what date can you start work? _____							
	List Hours Available for Work by Day Below:							
		Sun	Mon	Tues	Wed	Thur	Fri	Sat
	Day							
	Night							
	Total Weekly Hours Desired: _____							
	The following are circumstances including other employment, which will limit my hours of availability with							
	Bruxie: _____							
	_____							



E D U C A T I O N	<u>Name and Location</u>	<u>No. of Years Completed</u>	<u>Did You Graduate?</u>	<u>Degree Acquired</u>
	High School _____	_____	_____	_____
	College or University _____	_____	_____	_____
	Vocational or Business School _____	_____	_____	_____
Do you have any other experience, training, qualifications or skills which you feel make you especially suited for working at Bruxie? If so, please explain: _____				
_____				

**Note: We comply with the Americans With Disabilities Act and other applicable laws, and we will consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform the essential functions of a position.**

Are you able to perform the essential functions of the job for which you are applying? Yes\_\_\_\_ No\_\_\_\_

If "no," what are some reasonable accommodations to allow you to perform the essential functions of the job for which you are applying? \_\_\_\_\_

**List your last three employers below beginning with the present / last employer first. Account for all periods of unemployment. You must complete this section even if attaching a resume.**

E M P L O Y M E N T	Present or Last Employer _____ Telephone No. _____
	Address _____
	Street _____ City _____ State _____
	Zip _____
	Employed From _____ To _____ Supervisor's Name _____
	Starting Hourly Pay _____ Position/Duties _____
	Ending Hourly Pay _____ Reasons for Leaving _____ May we contact? Yes No



H I S T O R Y	Previous Employer _____ Telephone No. _____
	Address _____ Street _____ City _____ State _____
	Zip _____
	Employed From _____ To _____ Supervisor's Name _____
	Starting Hourly Pay _____ Position/Duties _____
	Ending Hourly Pay _____ Reasons for Leaving _____ May we contact? Yes No
R E F E R E N C E S	Previous Employer _____ Telephone No. _____
	Address _____ Street _____ City _____ State _____
	Zip _____
	Employed From _____ To _____ Supervisor's Name _____
	Starting Hourly Pay _____ Position/Duties _____
	Ending Hourly Pay _____ Reasons for Leaving _____ May we contact? Yes No
List two personal references that we can contact. Do not include relatives.	
Name _____ Occupation _____ Telephone No. _____	
Name _____ Occupation _____ Telephone No. _____	

**PLEASE READ THE FOLLOWING CAREFULLY AND SIGN BELOW:**

I certify that the answers given herein are true and complete to the best of my knowledge. I also authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

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 documentation or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) 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