



Indicate Languages you speak, read and or write:

Language 1:
Language 2:
Language 3:
Language 4:

List professional, trade, business or civic activities and offices held.

(You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status):

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Please list three references who are not related to you and are not previous employers:

Name	Address	Phone

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**Special Employment Notice to Disabled Veterans, Vietnam Era Veterans, and Individuals With Physical or Mental Handicaps.**

Government contractors are subject to 38 USC 2012 of the Viet Era Veterans Readjustment Act of 1974 which requires that they take affirmative action to employ and advance in employment qualified disabled veterans of the Vietnam Era, and Section 503 of the Rehabilitation Act of 1973, as amended, which require government contractors to take affirmative action to employ and advance in employment qualified handicapped individuals.

If you are a disabled veteran, or have a physical or mental handicap, you are invited to volunteer this information which will be treated as confidential. Failure to provide this information will not jeopardize or adversely affect your consideration for employment

If you wish to be identified, please sign below.

Handicapped Individual \_\_\_\_\_ Disabled Veteran \_\_\_\_\_ Vietnam Era Veteran \_\_\_\_\_

Signed: \_\_\_\_\_

# Employment Experience

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Start with your present or last job. Include military service assignments and volunteer activities. You may exclude organization names which indicate race, color, religion, gender, national origin, handicap or other protected status. (attaching your resume will satisfy this section of the application.)

Employer:	Employed From	To:	Work Performed:
Address:			
Job Title:			
Supervisor			
Reason for Leaving			
Employer:	Employed From	To:	Work Performed:
Address:			
Job Title:			
Supervisor			
Reason for Leaving			
Employer:	Employed From	To:	Work Performed:
Address:			
Job Title:			
Supervisor			
Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

**Special Skills and Qualifications:**

Summarize special skills and qualifications acquired from employment or other experience.

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**Education**

	High School	College/University	Graduate/Professional
School Name			
Years Completed/Degree			
Describe Course of Study:			
Describe Specialized Training, Apprenticeship, Skills and Extra Curricular Activities			

Please check this box if you are OSHA-10 Certified:

Honors Received: State any additional information you feel may be helpful to us in considering your application.

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**Applicants Statement**

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

The applicant understands that neither this document nor any offer of employment from the employer constitute an employment contract unless a specific document to that affect is executed by the employer and employee in writing. In the event of employment, I understand that false or misleading information given in my application or interview may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

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**Signature of Applicant**

**Date**