



A.J. Johns, Inc. Application for Employment

- ü Please complete the Application for Employment in its entirety. Without a completed application, you cannot be considered for the next step in the employment process.**
- ü Put an answer for every question. If it does not apply, your answer should be “N/A”**
- ü ALL dates should include a month and year**



APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer, dedicated to non-discrimination in employment on the basis of race, color, age, religion, sex, ethnicity, national origin, handicap, disability, or marital or veteran status.

Date: _____ Social Security No.: _____

Name: _____
Last First Middle

Are you 18
Years or Older? Yes No

Present Address: _____
Street Address City State

Phone No.: (____) _____ Referred by: _____

E-Mail Address: _____

If related to anyone who works for A.J. Johns, Inc.,
State Name, Department and Location: _____

How did you learn of our company or this position
opening? _____

Do you have your own transportation? Yes No

In Case of Emergency, Please Notify: _____
Name Address and Telephone Number

EMPLOYMENT DESIRED

Position: _____ Date You Can Start: _____ Salary Desired: _____

Are you Employed Now? Yes No May we inquire of your present employer: Yes No

Ever applied or worked at A.J. Johns, Inc., before?

Are there any days, shifts or hours you will not work? _____

If yes, please explain: _____

EDUCATION

	Name and Location of School	Degree/Certificate	Subjects Studied	Grade Average
Grammar School:				
High School:				
College:				
Trade, Business or Correspondence School:				

Other (including graduate school):			
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Have you ever been convicted of, or pled guilty, no contest or *nolo contendere* to a crime? £ Yes £ No

If yes, give details (date, place, offense(s), disposition, etc.): _____

Have you ever been charged with a crime and either been placed on a court-ordered probation, had adjudication withheld, entered a pre-trial intervention program or have any criminal charges now pending? £ Yes £ No

If yes, give details (date, place, offense(s), disposition, etc.): _____

PREVIOUS EMPLOYMENT: List below sequentially all of your employers in the last **ten (10) years** beginning with your current or most recent employer (use additional pages, if necessary)

Date Month and Year Leaving	Name, City, State and Phone # of Employer	Position and Job Duties	Salary	Reason for
From: To:				
From: To:				
From: To:				
From: To:				

May we contact the employer(s) listed above? £ Yes £ No

Did you work for any of these employers under a different name: £ Yes £ No

If yes, which employer(s) and under what name(s)?



APPLICATION FOR EMPLOYMENT

Please explain any gaps in your employment history: _____

Have you received any written reprimands or disciplinary suspension during any previous employment? Yes No

If yes, please explain: _____

Have you ever been discharged or asked to resign? Yes No

If yes, please explain (include by whom, when and for what): _____

REFERENCES: Give below the names of three persons not related to you, whom you have known at least one year.

Name	Address	Business	Years Acquainted

SKILLS: Please list below any specific skills, education, training, or certifications that apply to our industry that you have received and the approximate dates of each.



EMPLOYMENT APPLICATION CERTIFICATION

I hereby certify that all of the facts and information listed on this employment application are true and complete. I understand that any false, incomplete or misleading information given by me on this application is sufficient cause for rejection of this application. I also understand and agree that any such false, incomplete, or misleading information discovered on this application at any time after I am employed may result in my dismissal.

I hereby authorize the Company or independent contractor to investigate all statements contained in this application and to interview the references and previous employers listed in this application. I authorize the references and previous employers listed to give the Company all facts, opinions and evaluations concerning my previous employment and any other information they may have, personal or otherwise, and release all such parties from any liability which may allegedly arise from furnishing such information to the Company, including, but not limited to, any liability for defamation or invasion of privacy.

If I am offered employment, I understand that such an offer will be conditioned upon satisfactory results of a background investigation and/or Company medical examination or inquiry, including a drug screen test. If then employed, I understand that I will be required to serve a ninety (90) day introductory period. I further understand that my employment and compensation can be terminated, with or without cause or notice, at any time, regardless of the successful completion of my probationary period, at the option of either the Company or myself. I understand that no supervisor or other representative of the Company other than the President of the Company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

I further understand and voluntarily agree as a condition of employment or my continued employment, that I may be requested by the Company to submit to a urinalysis or other drug screen test and that my failure to take such test(s) when requested to do so or unsatisfactory test results will disqualify me from consideration for employment, or if I am then employed, may result in my immediate dismissal.

I certify that I have read, understand and agree with the above.

Date

Signature of Applicant

For Office Use Only:

Date of Hire: ____/____/____

Supervisor: _____

Pay Rate: _____

Position: _____

Notes:

