## **Application For Part Time Employment**

We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information or any other legally protected status.



## WE ARE AN EQUAL OPPORTUNITY EMPLOYER

(PLEASE PRINT)

Position(s) Applied For	,	- ,	Date o	of Application				
Last Name	First Name	Middle	Middle Name					
Address Number	Street	City	State Zip					
Telephone Number (s)		E-mail Addres	ss					
List any of your relatives currently employed here.  Are you under 16 years old?  Yes No								
Have you ever been employed with us before? Yes No If Yes, give date:  Date available for work / /  Are you available to work: Part-Time ( please indicate Mornings Afternoon Evenings )  Temporary ( please indicate dates available / / - / /  Have you ever been convicted of a violation of law other than a minor traffic violation? (The term "conviction" includes any conviction, a guilty plea, a plea of no contender or no contest, a suspended sentence, a deferred judgement, or a finding of guilt by a jury or judge.)  Education Name and Address of School Course of Study Number of Years Completed Diploma / Degree  High School Post Secondary Education								
Describe any specialized training, job-related skills, and extra-curricular activities.								
Describe any job-related training received in the United States military.								
Certifications.								

	List professional, trade, business or civic activities and offices held. You may exclude membership which would reveal gender, race, religion, national origin, age, ancestory, disability or other protected status:									
	State any additional inform	nation you	feel may be helpf	ul to us in c	considering	រូ your application.				
	Employment Exp	erienc	e							
	Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.									
1	Employer			Dates Employed		Worked Performed				
•	Address			From	То					
	Telephone Number(s)			Hourly Ra	ate / Salary Final					
	Job Title	Supervisor		Ottarting	1					
	Reason for Leaving			_						
2	Employer			Dates E From	mployed To	Worked Performed				
_	Address		FIOIII							
	Telephone Number(s)		Hourly Ra	ate / Salary Final						
	Job Title Supervisor		Starting	I IIIai						
	Reason for Leaving			-						
	References				<u> </u>					
1	Name Phone #		Phone #		E-mail					
•	(		( )							
2	Name Phone #		Phone #		E-mail					
_	( )		( )							
3	Name Phone #		Phone #		E-m	ail				
( )										
	Applicant's State		e true and comple	ete.						
I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with organization is of an "at will" nature, which means that the Employee may resign at any time the Employer may discharge Employee at any time with or without cause.										
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 the employer.										
	Signati	ure of Ap	plicant		Date					

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