DATE: _____

# APPLICATION FOR EMPLOYMENT

Western Elite provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, sexual orientation, gender, gender identity/expression, national origin, age, disability or genetics. In addition to federal law requirements, Western Elite complies with applicable state and local laws governing nondiscrimination and reasonable accommodations in employment in every location in which the company has facilities.

## APPLICANT TO COMPLETE (answer all questions - please print legibly)

### PERSONAL INFORMATION

NAME: _____

(FIRST) (MIDDLE) (LAST)

PHONE NUMBER: _____ EMAIL ADDRESS: _____

ADDRESS: _____

(STREET) (CITY) STATE ZIP CODE

DATE OF BIRTH: _____ ARE YOU LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES? (CIRCLE): YES NO

### EMPLOYMENT DESIRED:

POSITION: _____ DATE YOU CAN START: _____

RATE OF PAY EXPECTED: _____ WHO REFERRED YOU? _____

### EMPLOYMENT HISTORY:

HAVE YOU EVER APPLIED TO THIS COMPANY BEFORE? (CIRCLE): YES NO IF YES, WHEN? _____

HAVE YOU WORKED FOR THIS COMPANY BEFORE? (CIRCLE): YES NO IF YES, PLEASE ANSWER THE QUESTIONS BELOW:

DATES: FROM _____ TO: _____ RATE OF PAY:_____ POSITION: _____

(MONTH/YEAR) (MONTH/YEAR)

REASON FOR LEAVING: _____

ARE YOU CURRENTLY EMPLOYED? (CIRCLE:) YES NO IF NO, HOW LONG SINCE LEAVING LAST EMPLOYMENT? _____

**PLEASE LIST PREVIOUS EMPLOYERS IN *REVERSE* ORDER, STARTING WITH YOUR MOST RECENT JOB:**

**LAST/CURRENT EMPLOYER:** _____

ADDRESS: _____

(STREET) (CITY) (STATE) (ZIP)

POSITION HELD: _____ FROM: _____ TO: _____

(MONTHS/YEARS) (MONTHS/YEARS)

REASON FOR LEAVING: _____

CONTACT PERSON: _____ PHONE NUMBER: _____

**PREVIOUS EMPLOYER:** _____

ADDRESS: _____

(STREET) (CITY) (STATE) (ZIP)

POSITION HELD: _____ FROM: _____ TO: _____

(MONTHS/YEARS) (MONTHS/YEARS)

REASON FOR LEAVING: _____

CONTACT PERSON: _____ PHONE NUMBER: _____

**PREVIOUS EMPLOYER:** _____

ADDRESS: _____

(STREET) (CITY) (STATE) (ZIP)

POSITION HELD: _____ FROM: _____ TO: _____

(MONTHS/YEARS) (MONTHS/YEARS)

REASON FOR LEAVING: _____

CONTACT PERSON: _____ PHONE NUMBER: _____

## REQUIRED QUESTIONS

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR MISDEMEANOR? (CIRCLE): YES NO

IF YOU ANSWERED YES TO THE ABOVE QUESTION, PLEASE EXPLAIN: _____

_____

_____

_____

ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB WITH OR WITHOUT REASONABLE ACCOMMODATION? (CIRCLE): YES NO

_____

_____

## EDUCATION HISTORY

| | NAME AND LOCATION OF SCHOOL | CIRCLE LAST YEAR COMPLETED: | DID YOU GRADUATE? | SUBJECT STUDIED AND DEGREE(S) RECEIVED |
|---|---|---|---|---|
| HIGH SCHOOL | | 1 2 3 4 | YES NO | |
| COLLEGE | | 1 2 3 4 | YES NO | |
| TRADE, BUSINESS, OR CORRESPONDENCE SCHOOL | | 1 2 3 4 | YES NO | |

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL. FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE. **NEGATIVE RESULTS OF A PRE-EMPLOYMENT DRUG SCREEN IS A CONDITION OF EMPLOYMENT WITH WESTERN ELITE.**

SIGNATURE: _____ DATE: _____

EMAIL: _____ PHONE: _____