



3135 Floyd Blvd.
Sioux City, IA 51108

EMPLOYMENT APPLICATION

TODAY'S DATE: _____

INSTRUCTIONS TO APPLICANT: Please answer all questions and sign. You must fully and accurately complete this employment application. Incomplete applications will not be considered.

When completing, do not identify race, color, gender, age, national origin, citizenship, religion or provide any extraneous information.

Applications are considered active only for 30 days. Submission/receipt of an application does not mean that the company currently has a job position available.

The company will consider all applicants without discrimination on any basis prohibited by law and is an equal employment opportunity employer.

I. PERSONAL INFORMATION

Name: _____
Last First Middle
Address: _____ Phone: _____
Street
City State Zip: _____

Provide your most recent previous address:

Address: _____ Phone: _____
Street
City State Zip: _____

If you are hired, you must supply proof of your age.

Have you ever worked for the company before? Yes ___ No ___
When? _____

Reason for leaving: _____

Name of last supervisor at the company: _____

Have you ever applied for work with the company before? Yes ___ No ___
When? _____

2. KIND OF WORK DESIRED

What kind of work, job or position are you seeking? _____

What pay are you seeking? _____

Date you can begin work: _____

How were you referred to the company?

___ Employment Agency ___ Friend ___ Walked In
___ Newspaper Advertisement ___ State Employment Office ___ Other

Certain jobs may require working overtime and on weekends. Are you available for such hours of work? Yes ___ No ___

3. EMPLOYMENT HISTORY

Last Employer:

Company Name: _____

Address: _____
City State Zip

Phone: _____ Dates Employed: _____ to _____

Job Title: _____

Starting Pay: _____ Ending Pay: _____

Reason for leaving or desiring change: _____

Immediate Supervisor: _____

Describe duties and responsibilities: _____

Previous Employer:

Company Name: _____

Address: _____
City State Zip

Phone: _____ Dates Employed: _____ to _____

Job Title: _____

Starting Pay: _____ Ending Pay: _____

Reason for leaving or desiring change: _____

Immediate Supervisor: _____

Describe duties and responsibilities: _____

Previous Employer:

Company Name: _____

Address: _____
City State Zip

Phone: _____ Dates Employed: _____ to _____

Job Title: _____

Starting Pay: _____ Ending Pay: _____

Reason for leaving or desiring change: _____

Immediate Supervisor: _____

Describe duties and responsibilities: _____

4. **EDUCATION**

High School: _____
Name City State

Did you graduate? Yes ____ No ____

Other schools attended (post high school):

Name City State

Dates of attendance: _____

Did you receive a degree? Yes ____ No ____ When? _____

Area of study/type of degree? _____

Name City State

Dates of attendance: _____

Did you receive a degree? Yes ____ No ____ When? _____

Area of study/type of degree? _____

5. **OTHER BACKGROUND**

Have you been convicted of a felony? (Do not include convictions where the records have been expunged.)

Yes ____ No ____

If Yes, please identify the crime(s) for which you were convicted, date of conviction, and the state and county where convicted:

During any period of employment with the company, will you work for another employer or do you intend to seek additional work elsewhere?

Yes ____ No ____

Please describe below the three most important things to you about the place you work:

6. **REFERENCES**

Identify three persons not related to you that you have known for at least one year.

Name Address/Phone Years Acquainted

Name Address/Phone Years Acquainted

Name Address/Phone Years Acquainted

READ BEFORE SIGNING

I certify that the information on this application is complete, true and correct to the best of my knowledge. I understand that omission or misrepresentation of facts may be grounds for rejection of this application or for dismissal from employment as subsequently discovered.

I authorize investigation of all statements contained herein and of the references listed above to give you any and all pertinent information, personal or otherwise. I release all parties from liability or any damage that may result from furnishing the same to you.

I further understand that the company is an "at-will" employer. That means either I or the company may terminate the employment relationship, with or without notice, for any reason or no reason at any time. The at-will relationship may not be modified by oral or written statements by anyone at the company except by the General Manager acting through signed written agreement.

Date: _____ Signature