



APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer - All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.

PERSONAL INFORMATION *(Incomplete information could disqualify you from further consideration. Please complete all fields.)*

Name _____ Date _____
 Address _____
 E-mail Address _____ Home Phone # _____ Mobile Phone# _____

Are you eligible to work in the U.S.?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are you at Least 18 Years old?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If the job requires, do you have a valid driver's license?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Can you work any shift?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Can you work overtime, including weekends?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are you able to perform the functions of the job with or without accommodations?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been terminated from employment or asked to resign by an employer?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, please provide company name and details		

EMPLOYMENT DESIRED

Date you can start _____ Hourly Rate/Salary desired? _____
 Position desired _____
 Are you employed? _____ If so, may we inquire of your present employer? _____

REFERRAL SOURCE

How did you hear about us? (Check one) Advertisement Referral Walk In Other

Have you ever worked for this company before? Yes No Explain _____

Do you know anyone who works for our company? Yes No If yes, who? _____

EDUCATION	Name and location of school	No. of yrs. Attended	Degree Received	Subjects studied/Major
High School				
College or University				
Trade, Business, or Correspondence school				



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EMPLOYMENT HISTORY Include your last three (3) most recent employers, including periods of unemployment, starting with the most recent and working backwards in time. *Incomplete information could disqualify you from further consideration.*

From	To	Employer Name	Telephone
Job Title		Address	
Immediate Supervisor and title		Summarize the nature of work performed and job responsibilities	Reason for Leaving
From	To	Employer Name	Telephone
Job Title		Address	
Immediate Supervisor and title		Summarize the nature of work performed and job responsibilities	Reason for Leaving
From	To	Employer Name	Telephone
Job Title		Address	
Immediate Supervisor and title		Summarize the nature of work performed and job responsibilities	Reason for Leaving

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, explain:

Computer Skills (please describe): _____

REFERENCES Give the names of three persons not related to you, whom you have known at least three (3) years

Name	Address, Phone, Email	Company	Years Acquainted
1			
2			
3			

Please read carefully before signing.

Kennedy Restoration is an equal opportunity employer. Kennedy Restoration does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Kennedy Restoration to hire me. If I am hired, I understand that either Kennedy Restoration or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Kennedy Restoration has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to Kennedy Restoration true and complete information on this application. No requested information has been concealed. I authorize Kennedy Restoration to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Date _____ Applicant Signature _____

THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE SIGNED/DATED ABOVE.