



POSITION APPLYING FOR: _____ TODAY'S DATE: _____

PERSONAL INFORMATION					
Last Name		First Name		MI	
Street Address		City		State	Zip Code
Personal Phone		Email Address		Are you authorized to work in the U.S?	
Can you perform the essential job functions of the position you are applying for with reasonable accommodation for a disability if needed? <input type="checkbox"/> Yes <input type="checkbox"/> No					When are you available for work?
THIS BOX IS LEFT BLANK INTENTIONALLY				Salary desired \$ _____ per hour or per month	
How did you learn about this position?					
WORK HISTORY (STARTING WITH MOST RECENT)					
Last or present company			Job Title		
Address			Telephone		
Supervisor's name & title			Dates worked From To		
Job duties					
Reason for leaving			Whom may we contact at this employer?		
Last or present company			Job Title		
Address			Telephone		
Supervisor's name & title			Dates worked From To		
Job duties					
Reason for leaving			Whom may we contact at this employer?		
Last or present company			Job Title		
Address			Telephone		
Supervisor's name & title			Dates worked From To		
Job duties					
Reason for leaving			Whom may we contact at this employer?		

REFERENCES

List two past supervisors and one additional person who have knowledge of your work and are not related to you.

Name	Phone or email	Business	Relationship

EDUCATION

If any of your employment, educational or other records are under a name other than one provided above, please provide these names.

School Name	Location (city/state)	Degree/area of study	Dates Attended From To	Graduated?
High school			N/A	Yes No
College				Yes No
Post graduate				Yes No
Trade or Business school				Yes No

List skills relevant to the position applied for. Please include software applications you are proficient in.

If I accept an offer of employment with the Company, I hereby agree to comply with all its policies and procedures. I understand that my employment is contingent upon proof of identity and employment eligibility pursuant to the Immigration Reform and Control Act of 1986. I also understand that any offer of employment is contingent upon the successful completion of the company's standard drug test.

I hereby authorize The BoxMaker to verify and investigate my past and current employment education, and other background information, as The BoxMaker deems necessary. This may include checking references, interviewing past and current employers, and educational transcripts . I authorize all individuals, institution, and entities contacted by The BoxMaker to release information about my background, and I agree to hold hem harmless for the release of such information. I agree to hold The BoxMaker harmless from and against any liability arising out of such information.

I further authorize the Company to solicit information regarding my character, general reputation, previous employment, and similar professional background information. I hereby release all parties and persons connected with such requests for information from all claims, liabilities and damages for any reason arising out of the furnishing of such information. If employed, I release the company from any liability for future references it may provide regarding my work history at the firm. I understand that an investigative consumer report may be obtained through personal interviews with neighbors, friends or associates. If I am refused employment on the basis of such a report upon written request from me within a reasonable time, I have a right to ca complete and accurate disclosure of the nature and scope of the investigations requested by the Company.

I understand that misrepresentations or omissions of facts may result in rejection of the application, or if hired, discipline up to and including termination no matter how long I am employed. I understand that nothing contained in this application or conveyed during any interview is intended to create an employment contract. I understand that complete of this application does not indicate that a position is available and does not obligate The BoxMaker to hire me.

I understand and agree if I am hired by The BoxMaker, my employment will be at-will and voluntary and of indefinite duration. Either I or The BoxMaker may terminate the employment relationship at any time, with or without cause, and with or without notice. I also acknowledge that any representations to the contrary, whether written, verbal, or implied by any conduct or practice, are unauthorized and void, unless contained in a formal written employment contract signed by the President of The BoxMaker.

Applicant's Signature

Date

Applicant's Printed Name

BoxMaker is an equal opportunity employer without regard to race, color, gender, religion, or national origin.