



# THE WESTERN GROUP

The Screening People®

## Application for Employment

Last Name	First Name	Initial	Date of Application
Street Address	City	State	Zip
Residence Phone	Message Phone	Social Security Number	

### EQUAL EMPLOYMENT OPPORTUNITY

It is our policy to seek and employ the best qualified personnel in all our facilities and to provide equal opportunity for advancement of employees and to administer all our personnel policies in a manner that will not discriminate against any person because of race, color, religion, age, marital or veteran status, national origin, ancestry, disability (physical or mental handicap), on-the-job injuries, sexual orientation, source of income and any other status protected under applicable federal or state law unless it is a bona fide occupation requirement reasonably necessary to the operation of our business.

Position Applied For
Location Where Applied
Date Available
Rate of Pay Expected

**Referred By** (circle and indicate name):

Newspaper      Employee      On My Own      School      Agency      Other

Names of Source: \_\_\_\_\_

**Circle Type of Employment Desired:** Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Temp \_\_\_\_\_

**Circle Days Available:** Mon.    Tues.    Wed.    Thu.    Fri.    Sat.    Sun.

**Are you willing to work overtime?** Yes \_\_\_\_\_ No \_\_\_\_\_

**Have you ever worked for us before?** Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, what location? \_\_\_\_\_ When? \_\_\_\_\_

**Are you authorized to accept employment in the United States?** Yes \_\_\_\_\_ No \_\_\_\_\_  
(Successful applicants will be required to prove identity and eligibility for employment)

**Are you 18 years of age or older?** Yes \_\_\_\_\_ No \_\_\_\_\_

**QUALIFICATIONS:** Please list any education, training and/or specialized experience (such as schools; colleges, degrees; licenses; vocational, technical or military experience; hobbies; etc) you feel would help you perform the work for which you are applying.

DEGREES, LICENSES  
RELEVANT EDUCATION  
OR TRAINING

WHERE DID YOU ACQUIRE IT?  
Name and address of:  
school, program, military branch & speciality, etc.

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**CRIMINAL CONVICTIONS:** (Conviction of a crime is not an automatic bar of employment. Factors such as the nature and gravity of the crime, the length of time since the conviction and/or completion of any sentence, and the nature of the job which you have applied for will be considered.)

Have you ever been CONVICTED, pled GUILTY or NO CONTEST or FORFEITED BOND OR BAIL for any crime other than traffic violations?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

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Do you have a valid Drivers License? \_\_\_\_\_

**DRIVING POSITIONS:** If the position applied for involves driving, have you ever been CONVICTED, pled GUILTY, NO CONTEST or FORFEITED BOND OR BAIL for any traffic violations in the past three years?

Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

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**IN CASE OF EMERGENCY NOTIFY:**

Name	Address	Telephone Number

**EMPLOYMENT EXPERIENCE:** Please account for all periods of employment, including U.S. Military service. This section must be completed in full even if a resume is attached.

1. Previous Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No. ( ) \_\_\_\_\_ Supervisor: \_\_\_\_\_

Hire Date \_\_\_\_\_ Date Left \_\_\_\_\_ Pay: Starting \_\_\_\_\_ Final \_\_\_\_\_

Job Title \_\_\_\_\_ Duties \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

2. Previous Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No. ( ) \_\_\_\_\_ Supervisor: \_\_\_\_\_

Hire Date \_\_\_\_\_ Date Left \_\_\_\_\_ Pay: Starting \_\_\_\_\_ Final \_\_\_\_\_

Job Title \_\_\_\_\_ Duties \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

3. Previous Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No. ( ) \_\_\_\_\_ Supervisor: \_\_\_\_\_

Hire Date \_\_\_\_\_ Date Left \_\_\_\_\_ Pay: Starting \_\_\_\_\_ Final \_\_\_\_\_

Job Title \_\_\_\_\_ Duties \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

4. Previous Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No. ( ) \_\_\_\_\_ Supervisor: \_\_\_\_\_

Hire Date \_\_\_\_\_ Date Left \_\_\_\_\_ Pay: Starting \_\_\_\_\_ Final \_\_\_\_\_

Job Title \_\_\_\_\_ Duties \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

1. I authorize the investigation of all matters which the Company deems relevant to my qualifications for employment, including all statements made in this application and in any attached or supporting documents. I authorize you to request and receive such information and I release all liability any person (such as former supervisors) or employers supplying it. I also release you from all liability which might result from making the investigation.

2. I certify that the facts and information in this application and in any attachments or supporting documents are true and complete to the best of my knowledge. I understand that any falsifications, misrepresentation or omission, as well as any misleading statements or omissions, generally will result in denial of employment or immediate termination, regardless of when and how discovered.

3. I understand that I may be required to submit to pre- or post-employment physical or other professional examination, medical inquiries and/or urinalysis tests for the presence of drugs and/or alcohol. I agree to such examinations and/or testing at the Company's expense. I authorize release of the results to the Company and their use to evaluate my suitability for employment. I also release the Company from all liability arising out of, or connected with, the examinations and/or testing.

4. I understand that I may resign or be terminated, without cause or notice, at any time, unless otherwise stated in a collective bargaining agreement or an employment contract. I also understand that the President is the only person who will have the authority to agree to any other terms and/or enter into such agreements or contracts and that all such agreements or contracts must be in writing and signed by both parties. I also understand that unless otherwise stated in a collective bargaining agreement or employment contract, the Company may change, withdraw and interpret other policies (including wages, hours and working conditions) as it deems appropriate.

**APPLICATION MUST BE COMPLETED IN FULL TO RECEIVE CONSIDERATION.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

For Office Use Only