Read Job Application

APPLICATION FOR EMPLOYMENT

Name

Last _____ First _____ Middle Initial _____

Address	City	State	Zip Code

Phone ( )	Email Address

Are you 18 or older?	Sex
☒ Yes ☐ No	☐ Male ☐ Female ☐ Non-binary

	Do you have a driver's license?	If yes, what state?
	☐ Yes ☐ No	

EMPLOYMENT

Position desired:	Check one:	When can you work?
	☐ Full-time ☐ Part-time	☐ Days ☐ Nights ☐ Weekends

EDUCATION

School:

Are you currently enrolled in school?	Name of School:	Address:
☐ Yes ☐ No		

WORK HISTORY

From	To	Company/Address	Position

Signature _____ Date _____