



Employment Application

Summercrest does not discriminate in hiring for employment on the basis of race, color, religion, national origin, sex, age, military status, or disability. No question on this application is intended to secure information to be used for such discrimination. This application will be given every consideration; however, its receipt does not imply employment for the applicant.

APPLICANT INFORMATION					
Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Date Available		Social Security No.		Desired Salary	
Position applying for			Are you at least 18 yrs old?		YES <input type="checkbox"/> NO <input type="checkbox"/>
Are you a citizen of the United States?		YES <input type="checkbox"/> NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?		YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?		YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, when?		
Have you ever been convicted of a felony?		YES <input type="checkbox"/> NO <input type="checkbox"/>	If yes, explain		

Specify when you are available to work (Please circle)

Days	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	All
Times	Days		Evenings		Overnights		All	
Desired Employment Status	Full Time			Part Time				

How did you find out about this job opening?

Web Page (identify)
 Newspaper/ Journal Ad (identify)

Referral
 Job Service
 Other (please explain)

EDUCATION

High School		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other		Address			
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

PROFESSIONAL LICENSES AND/OR CERTIFICATIONS

Type	Origin or State Issued	Date Issued	Number	Verification (Office USE Only)



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PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

Please explain all periods of unemployment:

If your former employment references or education are under a name other than presented on the front of the application please indicate:

Last	First	M.I.
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Please list any additional information which will assist us in placing you:



REFERENCES

Please list three professional references and one personal reference

Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

Are you aware of any limitations you may have which would limit your ability to perform the essential functions of the position(s) for which you are applying? YES NO

If so, what accommodations will you require? Explain

DISCLAIMER AND SIGNATURE

I voluntarily give Summercrest the right to make a thorough investigation of my past employment and activities. I agree to cooperate in such investigations and release from all liability or responsibility all persons, companies, or corporations supplying such information.

I understand that for positions which require use of a company vehicle, a check of my driving record will be conducted.

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my termination.

I consent to take the employment physical examination after I am given an offer of employment and such future physical examinations as may be required by Summercrest, which may include a drug test, at such time and places as Summercrest shall designate. I acknowledge that I may also be required to take a drug test at any time during my employment with Summercrest.

I understand that my employment is at will, and that either party is free to terminate the employment relationship at any time without cause. I understand that I will be required to follow the personnel policies and rules of Summercrest and that not doing so may lead to termination of my employment. I also understand that my employment may be terminated for any misstatement or omission of fact appearing on this application form. If employed, I will be required to complete an Employment Verification Form (I-9), and show satisfactory evidence of identity and eligibility for employment in the USA.

Signature	Date
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