



**ASA INSTITUTE**

# APPLICATION FOR EMPLOYMENT

## NOTICE TO APPLICANTS

Federal and State law requires that all applicants be considered without regard to race, religion, color, sex, age or national origin. We believe in and fully support the principle of equal employment opportunity and fulfill our obligation to the fullest

	Name _____ Social Security No. _____ / _____ / _____
	Address _____
	Telephone Numbers ( ) - _____ ( ) - _____
	Position Applied For _____ Date you can start _____
	Salary Expected _____ Hourly _____ Yearly _____
	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <i>If Part Time: Hours you can work</i> Mon-Fri _____ Sat-Sun _____
	How did you hear of opening? _____
	Have you worked with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No
	<i>If Yes, please explain listing previous Job/Title/Location and Length of service:</i> _____
	What was your reason for leaving? _____
	List any friends and/or relatives working with us now? _____
	Do you speak any foreign language fluently? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If Yes, please list</i> _____

**PERSONAL DATA**

### GENERAL INFORMATION

Are you under age 18: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please provide your age: _____
If you are under age 18, can you supply working papers?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Only U.S. Citizens or legal aliens with work authorization are eligible for employment. Can you, upon employment, provide genuine documentation establishing your identity and eligibility to be legally employed in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted of a crime or violation other than a minor traffic infraction?	<input type="checkbox"/> Yes <input type="checkbox"/> No
(A conviction record will not necessarily be a bar to employment. Factors such as job relations, age and time of the offense, seriousness and nature of violation and rehabilitation will be taken into account). <i>If Yes, please explain:</i> _____	
Have you ever trained in the Unites States military? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If Yes, please give date:</i> _____	
Are you able to perform the essential requirements of the job? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If No, are there reasonable accommodations that can be made to allow you to perform the essential functions of the job?</i> _____	
List professional, trade, business, or civil activities and offices held. (You may exclude memberships which may reveal sex, race, religion, national origin, age or disability or other protected status)	
_____	

<b>REFERENCES</b>	Give name, address, and telephone number of three business references who are not related to you.			
	1.	_____		
	2.	_____		
	3.	_____		

<b>EDUCATION</b>	NAME AND LOCATION OF SCHOOL		GRADUATED	MAJOR/DEGREE	GPA
	High School		<input type="checkbox"/> Yes <input type="checkbox"/> No		
	College		<input type="checkbox"/> Yes <input type="checkbox"/> No		
	Graduate School		<input type="checkbox"/> Yes <input type="checkbox"/> No		
	Other		<input type="checkbox"/> Yes <input type="checkbox"/> No		

<b>EMPLOYMENT HISTORY</b>	PRESENT/PREVIOUS EMPLOYEE DATA							
	LIST IN REVERSE ORDER BEGINNING WITH CURRENT EMPLOYER							
	1 – Company name	3 – City, State and Zip	Position/ Job title	Dates		Salary		Reason for leaving
	2 – Company Address	4 – Contact / Phone No.		From	To	Beginning	Ending	
	1							
	2							
	3							
	4							
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	1							
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	1							
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	4							

*I certify that the answers given above are true and complete to the best of my knowledge. I also authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand and acknowledge hereby that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause.*

*It is further understood that this "at will" employment relationship may not be changed by any written documentation or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules of the Employer*

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_