

Crystal Employment Services Inc.

Application for Employment

Crystal Employment Services, Inc. considers applicants for all positions without regard to race, color, religion, gender, national origin, age, disability, sexual orientation, or any other legally protected status.

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(Please Print)

Last Name	First Name	Middle Name
Address	City	State & Zip
Telephone Number(s) Home -	E-Mail Address	Social Security Number
Cell -	Date of Birth	Drivers License Number
Emergency Contact Information (Name	e, Relationship and Phone Number)	

If you are under 18 years of age, can you provide required proof of your eligibility to work?	Yes	No
WOLK:	res	No
Have you ever been employed with us before?	Yes	No
Are you currently employed?	Yes	No
May we contact your present employer?	Yes	No
Are you a veteran?	Yes	No
Are you prevented from lawfully becoming employed in the United States of		
America because of visa or immigration status?		
NOTE: Proof of citizenship or immigration status will be required upon employment.	Yes	No
On what date would you be available for work?		
Are you available to work: Full Time Part Time	Shift Work	Temporary
Are you currently on layoff status and subject to recall?	Yes	No
Can you travel if a job requires it?	Yes	No
University bear and interest of a following their the last 7 company		
Have you been convicted of a felony within the last 7 years? NOTE: Convictions will not necessarily disqualify you from employment.	Yes	No
NOTE. Convictions will not necessarily disqualify you from employment.	163	110

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Education

	Name and Address Of School	Course of Study	Years Completed	Diploma/Degree
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Describe any specialized training, apprenticeship, skills or extra-curricular activities that may contribute to your work at				
Crystal Employment Services Inc.				

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Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin disabilities or other protected information. Continue on the back of this page if necessary.

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Additional Information

Other Qualifications	Other	Qual	lifica	tion	S
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Summarize special job-related skills and qualifications acquired from employment or other experience that have not been previously mentioned.
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References

Name	Phone Number	
Address		
Name	Phone Number	
Address		
Name	Phone Number	
Address	1	

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Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted by Crystal Employment Services, Inc. at that time. I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with Crystal Employment Services, Inc. is of an "at will" nature, which means that the Employee may resign at any time and Crystal Employment Services, Inc. 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 document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of Crystal Employment Services Inc. 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 and regulations of Crystal Employment Services, Inc. Signature of Applicant Date FOR PERSONNEL DEPARTMENT USE ONLY Remarks Interviewed by: Date: **Employed** Date of Employment _____ Yes No Job Title: Hourly Rate/Salary ______ Dept. _____ By: Name and Title ______ Date ____ Notes:

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