

Application for Employment

Pre-Employment Questionnaire - Equal Opportunity Employer

DATE _____

PERSONAL INFORMATION

NAME: Last		First	Middle Initial	Social Security Number	
Present Address		City		State	Zip Code
Permanent Address		City		State	Zip Code
Phone Number			Referred By:		

EMPLOYMENT DESIRED

Position	Date you can start	Salary desired	
Are you currently employed? Yes ___ No ___		May we contact your current employer? Yes ___ No ___	
Have you applied to this company before? Yes ___ No ___		Where?	When?

EDUCATION

SCHOOL NAME	LOCATION	YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
Grade School				
High School				
College				
Trade, Business, or Correspondence School				

GENERAL

Subjects of special study/research work or special training/skills:	
U.S. Military or Naval Services:	Rank:

FORMER EMPLOYERS (List last three employers, starting with most recent)

Date (Month and Year)	Name & Address of Employer	Salary	Position	Reason for leaving
From:				
To:				
From:				
To:				
From:				
To:				

(Continued on Back Side)

REFERENCES

(List the names of three people not related to you, whom you have known at least one year.)

Name	Address	Phone	Business Title	Years Known
1)				
2)				
3)				

AUTHORIZATION

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal."

"I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information."

"I understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative."

"I also agree, if hired, that I may be required to take and pass substance abuse tests for drugs or alcohol."

"I acknowledge that I have been informed the company participates in E-Verify."

Date: _____ Signature: _____

Interviewed By: _____ Date: _____

----- DO NOT WRITE BELOW THIS LINE -----

REMARKS

NEATNESS:	CHARACTER:		
PERSONALITY:	ABILITY:		
HIRED	DEPARTMENT	POSITION	SALARY

INVITATION TO SELF-IDENTIFY FOR PURPOSES OF THE EEO-1 FORM

Our company is subject to certain governmental recordkeeping and reporting requirements for the the administration of civil rights laws and regulations. In order to comply with these laws, the company invites employees to voluntarily self-identify their race or ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

Employee Name: _____ Date: _____

PLEASE CHECK ONE:

- Male
- Female

INDICATE THE APPROPRIATE RACE/ETHNIC GROUP:

- Hispanic or Latino
- White (Not Hispanic or Latino)
- Black or African American (Not Hispanic or Latino)
- Asian (Not Hispanic or Latino)
- Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)
- American Indian Or Alaska Native (Not Hispanic or Latino)
- Two or More races (Not Hispanic or Latino)

This Employer Participates in E-Verify

E-Verify



This employer will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.

IMPORTANT: If the Government cannot confirm that you are authorized to work, this employer is required to provide you written instructions and an opportunity to contact SSA and/or DHS before taking adverse action against you, including terminating your employment.

Employers may not use E-Verify to pre-screen job applicants or to re-verify current employees and may not limit or influence the choice of documents presented for use on the Form I-9.

In order to determine whether Form I-9 documentation is valid, this employer uses E-Verify's photo screening tool to match the photograph appearing on some permanent resident and employment authorization cards with the official U.S. Citizenship and Immigration Services' (USCIS) photograph.



If you believe that your employer has violated its responsibilities under this program or has discriminated against you during the verification process based upon your national origin or citizenship status, please call the Office of Special Counsel at 1-800-255-7688 (TDD: 1-800-237-2515).

Employment Verification  Done.

For more information on E-Verify, please contact DHS at:

1-888-464-4218



E-VERIFY IS A SERVICE OF DHS AND SSA

Este Empleador Participa en E-Verify

E-Verify™

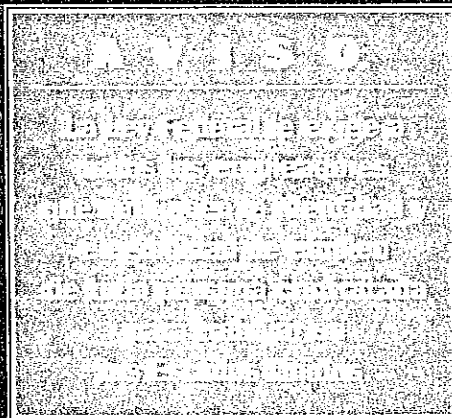


Este empleador le proporcionará a la Administración del Seguro Social (SSA), y si es necesario, al Departamento de Seguridad Nacional (DHS), información obtenida del Formulario I-9 correspondiente a cada empleado recién contratado con el propósito de confirmar la autorización de trabajo.

IMPORTANTE: En dado caso que el gobierno no pueda confirmar si está usted autorizado para trabajar, este empleador está obligado a proporcionarle las instrucciones por escrito y darle la oportunidad a que se ponga en contacto con la oficina del SSA y, o el DHS antes de tomar una determinación adversa en contra suya, inclusive despedirlo.

Los empleadores no pueden utilizar E-Verify con el propósito de realizar una preselección de aspirantes a empleo o para hacer nuevas verificaciones de los empleados actuales, y no deben

restringir o influenciar la selección de los documentos que sean presentados para ser utilizados en el Formulario I-9.



A fin de poder determinar si la documentación del Formulario I-9 es válida o no, este empleador utiliza la herramienta de selección fotográfica de E-Verify para comparar la fotografía que aparece en algunas de las tarjetas de residente y autorizaciones de empleo, con las fotografías oficiales del Servicio de Inmigración y Ciudadanía de los Estados Unidos (USCIS).

Si usted cree que su empleador ha violado sus responsabilidades bajo este programa, o ha discriminado en contra suya durante el proceso de verificación debido a su lugar de origen o condición de ciudadanía, favor ponerse en contacto con la Oficina de Asesoría Especial llamando al 1-800-255-7688 (TDD: 1-800-237-2515).

Employment Verification.  Done.

Para mayor información sobre E-Verify, favor ponerse en contacto con la oficina del DHS llamando al:

1-888-464-4218



E-VERIFY IS A SERVICE OF DHS AND SSA

IF YOU HAVE THE RIGHT TO WORK, Don't let anyone take it away.



If you have a legal right to work in the United States, there are laws to protect you against discrimination in the workplace.

You should know that –

No employer can deny you a job or fire you because of your national origin.

Unless mandated by law or government contract, employers cannot require you to be a U.S. Citizen or permanent resident or refuse any legally acceptable documents.

If any of these things have happened to you, you may have a valid charge of discrimination that can be filed with the OSC. Contact the OSC for assistance in your own language.

Call 1-800-255-7688, TDD for the hearing impaired is 1-800-237-2515.

In the Washington, D.C., area, please call 202-616-5594, TDD 202-616-5525

Or write to:
U.S. Department of Justice
Office of Special Counsel - NYA
950 Pennsylvania Ave., N.W.
Washington, DC 20530

**U.S. Department of Justice
Civil Rights Division**

Office of Special Counsel for
Immigration-Related Unfair
Employment Practices



SI USTED TIENE DERECHO A TRABAJAR, no deje que nadie se lo quite.



Si tiene derecho a trabajar legalmente en los Estados Unidos, existen leyes para protegerlo contra la discriminación en el trabajo.

Debe saber que -

Ningún patrón puede negarle trabajo, ni puede despedirlo, debido a su país de origen o su condición de inmigrante.

En la mayoría de los casos, los patrones no pueden exigir que usted sea ciudadano de los Estados Unidos o residente permanente o negarse a aceptar documentos válidos por ley.

Llame al 1-800-255-7688.

La línea telefónica para personas con problemas de audición, es

1-800-237-2515. En

Washington, D.C., llame al

202-616-5594, o al

202-616-5525 (personas

con problemas de audición), o

escriba a la Oficina del

Consejero Especial, División de

Derechos Civiles, P.O. Box 27728,

Washington, DC 20038-7728.

**Departamento de Justicia
De los Estados Unidos,
División de Derechos Civiles**

Oficina del Consejero Especial

