

APPLICATION FOR EMPLOYMENT

Each question should be fully and accurately answered. No action can be taken until all questions have been answered. Use blank paper if you do not have enough room on this application form. PLEASE PRINT, except for signature on back of application. All information you give will be held in strict confidence.

Job Applied For: _____ Today's Date: _____

Are you seeking: FULL TIME PART TIME TEMPORARY/SUMMER employment?

When are you available to begin? _____

YOUR INFORMATION

LAST NAME FIRST NAME MIDDLE NAME

STREET ADDRESS CITY STATE ZIP

PHONE EMAIL DATE OF BIRTH

If you are applying for a job with a minimum age requirement, you may be required to show proof of age.

Are you authorized to work lawfully in the United States? _____

Were you employed at D&E in the past? _____ When? _____

For DRIVING JOBS ONLY

Do you have a valid driver's license? _____ License Number: _____ State: _____

Did you serve in the military? _____ Are you a member of a reserve organization? _____

Branch of service: _____ Service duties: _____

SCHOOLS ATTENDED

High School: _____ Location: _____

Highest Grade Completed: _____ Did you graduate? _____

College: _____ Location: _____

Major: _____ Degree: _____

Additional education and/or vocational or technical training information: _____

School: _____ Location: _____

EXPERIENCE

List any business machines / equipment you are experienced at operating: _____

List any plant machines / equipment you are experienced at operating: _____

Please list any other relevant skills (including computer skills): _____

REFERENCES (Provide three professional references – not relatives)

NAME ADDRESS PHONE OCCUPATION

List names of employers in consecutive order with present or last employer first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references. PLEASE GIVE MONTH AND YEAR.

1. _____
 Present or Last Employer Job Title

Job Duties _____

Address City State Zip

Employed from (date) to (date) Pay: Start Final

Reason for leaving Name of last supervisor

2. _____
 Name of Employer Job Title

Job Duties _____

Address City State Zip

Employed from (date) to (date) Pay: Start Final

Reason for leaving Name of last supervisor

3. _____
 Name of Employer Job Title

Job Duties _____

Address City State Zip

Employed from (date) to (date) Pay: Start Final

Reason for leaving Name of last supervisor

Is any additional information relative to change of name, use of assumed name, or nickname necessary to enable us to check your work record? _____
 Are you currently employed? _____ If yes, may we contact your present employer? _____

In making this application for employment, it is understood that an investigation may be made whereby information is obtained through personal interviews or background checks. This inquiry may include information about your character, general reputation, criminal record, and personal characteristics.

I certify that the answers given by me to the foregoing questions and statements are true and correct without consequential omissions of any kind whatsoever. I also authorize the companies, schools or persons named above to give any information regarding my employment, character, and qualifications. I understand that any misleading or incorrect statements may render this application void, and if employed, would be cause for termination. I understand that if employed, I have been hired at the will of the employer and that any employment may be terminated at will; at any time; and with or without cause that employer's only obligation being to pay salary or wages due and owing at the time of the termination.

Signature: _____ Date: _____

FOR COLLEGE USE ONLY

Disposition _____ Date Employed _____ Starting Rate \$ _____ per _____
 Job Classification _____ Department _____ Time Sheet Required _____
 Interviewed by _____ Interviewer's remarks & recommendations _____

Application information checked by _____ Date _____