



## Employment Application

<b>Applicant information</b>									
Last Name		First Name		MI		Date			
Street Address						Apt/Unit #			
City				State			Zip Code		
Phone				Email					
Are you legally able to be employed in the United States?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	If no, verification will be required by law.				
Have you ever worked for Organic Remedies?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, when.				
Have you ever been convicted of a felony?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, explain.				
Have you served in the military?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, what branch?				
<b>Availability</b>									
<i>This position may require evening and weekend hours.</i>									
Date Available to Start					Hours Available per Week				
List Specific Days/Times You Are <u>NOT</u> Available:									
<b>Education</b>									
High School					Address				
From		To		Did you graduate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, what is your degree?		
College					Address				
From		To		Did you graduate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, what is your degree?		
Other					Address				
From		To		Did you graduate?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, what is your degree?		

<b>References</b>			
<i>Please list three professional references.</i>			
Full Name		Relationship	
Company		Phone	
Address			
Full Name		Relationship	
Company		Phone	
Address			
Full Name		Relationship	
Company		Phone	
Address			

<b>Work Experience</b>							
	Current/Most Recent		Previous Job #2		Previous Job #3		
Company/Employer							
Address							
Phone							
Supervisor's Name							
Position/Job Title							
Dates of Employment	From	To	From	To	From	To	
Starting/Ending Pay	\$	\$	\$	\$	\$	\$	
Reason for Leaving							
May we contact?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

<b>Disclaimer &amp; Signature</b>	
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 release.	
Signature	Date