

An Equal Opportunity Employer - All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.

Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions on this application. You may attach a resume, but all questions must be answered.

PERSONAL INFORMATION:				
Name (last, first, middle)			Date:	
Street Address and/or Mailing address		City:	State:	Zip:
E-mail:				
Home Phone:		Mobile Phone:		
Are you at least 18 years or older? (If no, you may be required to provide authorization to work.)			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been terminated from employment or asked to resign by an employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please provide company names and details:		
Date you can start work:				
POSITION INFORMATION: Check all that you are willing to work				
Hours:	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time	<input type="checkbox"/> Day <input type="checkbox"/> Evening	<input type="checkbox"/> Swing <input type="checkbox"/> Graveyard <input type="checkbox"/> Weekends	<input type="checkbox"/> Regular <input type="checkbox"/> Temporary
Are you legally eligible to be employed in the U.S.?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation?			<input type="checkbox"/> Yes <input type="checkbox"/> No	
QUALIFICATIONS: Please list any education or training you feel relates to the position applied for that would help you perform the work such as schools, colleges, degrees, vocational or technical programs and military training.				
School/Other:	School Name:	Degree:	Address/City/State	
SPECIAL SKILLS: List any special skills or experience that you feel would help you in the position that you are applying for (Leadership, organization/teams etc.)				
REFERENCES: Please list three professional references not related to you, with full name, company, phone number and relationship. If you don't have three professional references then list personal, unrelated references.				
Name:	Company:	Title:	Phone:	Relationship:

REFERRAL SOURCE:		
How did you hear about us?	<input type="checkbox"/> Walk-In <input type="checkbox"/> Indeed <input type="checkbox"/> Craigslist	<input type="checkbox"/> Truck <input type="checkbox"/> Facebook <input type="checkbox"/> Glassdoor
		<input type="checkbox"/> ZipRecruiter <input type="checkbox"/> Referral: _____ <input type="checkbox"/> Other: _____
Have you ever worked for this company before?		<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, Explain:		
Do you know anyone who works for our company?		<input type="checkbox"/> Yes <input type="checkbox"/> No Who: _____

WORK HISTORY: Start with your present or most recent employment and work back. Use separate sheet is necessary.		
Job Title #1	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name:	Supervisor's Name:	Phone Number:
City:	State:	Zip:
Duties:		
Reason for Leaving:		
May we contact your present employer		<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A

Job Title #2	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name:	Supervisor's Name:	Phone Number:
City:	State:	Zip:
Duties:		
Reason for Leaving:		

Job Title #3	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name:	Supervisor's Name:	Phone Number:
City:	State:	Zip:
Duties:		
Reason for Leaving:		

Job Title #4	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name:	Supervisor's Name:	Phone Number:
City:	State:	Zip:
Duties:		
Reason for Leaving:		

Paul Davis is an equal opportunity employer. Paul Davis does not discriminate in employment because of race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service. I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Paul Davis to hire me. If I am hired, I understand that either Paul Davis or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Paul Davis has the authority to make any assurance to the contrary. I attest with my signature below that I have given to Paul Davis true and complete information on this application. No requested information has been concealed.

I authorize Paul Davis to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE SIGNED/DATED ABOVE

Signature of Applicant: _____ Date: _____