



**Application for Employment
An Equal Opportunity Employer**

Each question should be answered completely. No action will be taken on this application until all questions have been answered. Please write legibly. **DO NOT** substitute "See Resume" for information requested on the application form. **PLEASE PRINT**, except for the required signature. All information provided will be available only to persons who have a "need to know" or as required by law. The Company will make reasonable accommodation in the application and interview process for any disabled applicant upon request. This application is valid **ONLY** for the position listed below. BOB only accepts applications for open positions.

Applicant Information			
Last Name	First	M.I.	Date
Street Address			
City	State	ZIP	
Phone	E-mail Address		
Position Applied for		Date Available:	
Are you authorized to work in the United States		YES <input type="checkbox"/> NO <input type="checkbox"/>	Are you over 18 years of age YES <input type="checkbox"/> NO <input type="checkbox"/>
<u>Federal law requires proof of identity and employment authorization for all new employees</u>			
For Driving Positions Only: Do you have a valid driver's license		YES <input type="checkbox"/> NO <input type="checkbox"/>	License Number and State Issued:
Have you ever been previously employed by BOB		YES <input type="checkbox"/> NO <input type="checkbox"/>	If so, when? Reason for leaving
Have you ever been convicted, entered a plea of nolo contendere or received a withheld judgment for any criminal offense. (misdemeanor or felony)? A conviction will not necessarily disqualify a person.			YES <input type="checkbox"/> NO <input type="checkbox"/>
If yes, explain			
Do you have a criminal matter currently pending: YES <input type="checkbox"/> NO <input type="checkbox"/>			
Previous Employment			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your current/previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			

From	To	Reason for Leaving
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/> NO <input type="checkbox"/>

Have any of your prior employers ever disciplined you including, but not limited to, a written warning, suspension, demotion, or termination of your employment? If so, please explain **each** incident by providing the date of occurrence, disciplinary action taken, facts surrounding the action (e.g., specific policy violation or performance issue), and the name of the employer. If you need additional space, please continue on a separate piece of paper. It is critical that the applicant be upfront in his or her response so that the Company can assess the significance of the prior action. Failure to provide full disclosure may result in disqualification from employment consideration, or if hired, termination.

Education			
High School	Did you graduate	YES <input type="checkbox"/>	NO <input type="checkbox"/>
College	Did you graduate	YES <input type="checkbox"/>	NO <input type="checkbox"/> Degree:
Other job related education/skills:			

If you are an experienced operator of any position-related business/plant machines or equipment, please list:

References	
<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	

This Employment Application is used to notify me that the nature and scope of an investigation, if one is conducted, could include such general identification information as residence verification, and, as applicable, information concerning my employment, education, general reputation, character, and that such information may be developed through personal interviews with third parties. Only job-related information developed from such a report will be considered in evaluating my employment application or continued employment. I hereby authorize these persons, companies, organizations or corporations to answer all questions or release any information regarding the items listed in this paragraph. I hereby release them from any liability and hold them harmless from any claim for releasing any truthful information within their knowledge and/or records.

I authorize the Company to release to any person, firm, entity or organization with which I may seek employment in the future, any truthful information concerning my work experience with the Company. I hereby release and hold the Company harmless from any claim for releasing any truthful information within its knowledge and/or records.

I understand that any job offer that may be extended to me will be contingent upon the successful completion of a drug and alcohol test.

I certify that the answers given by me to the foregoing questions and during any interviews are true and correct without material omissions, and understand that, if employed, omissions and/or false statements on this application or during any interviews may result in dismissal. **I understand and acknowledge that, if hired, my employment is for no definite period and either the Employer or I may terminate our relationship at will at any time, without notice or any reason, and that this employment application does not constitute an employment contract.**

I have had an opportunity to have my questions about this statement's content and intent answered and understand its terms.

Date	Signature of Applicant
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