

**WOLFENDALE INC. EMPLOYMENT APPLICATION**

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, veteran status, the presence of a non-job-related medical condition or disability or any other legally protected status.

(PLEASE PRINT)		DATE OF APPLICATION
LAST NAME	FIRST NAME	MIDDLE NAME
ADDRESS		TELEPHONE
CITY	STATE/ZIP	
POSITION(S) APPLIED FOR		SOCIAL SECURITY NUMBER

EDUCATION	NAME AND LOCATION	# YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
HIGHSCHOOL				
COLLEGE				
TRADE/BUS/TECH				

**EMPLOYMENT HISTORY**

*Please provide a complete history of all position held, including military, part-time, summer, and volunteer employment, using additional sheet as necessary. List in chronological order starting with the most recent or present position.*

MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
JOB TITLE AND PRINCIPAL DUTIES				
NAME AND TITLE OF SUPERVISOR				
FROM				
TO				
JOB TITLE AND PRINCIPAL DUTIES				
NAME AND TITLE OF SUPERVISOR				
FROM				
TO				
JOB TITLE AND PRINCIPAL DUTIES				
NAME AND TITLE OF SUPERVISOR				

**EMPLOYMENT DESIRED**

Position applying for: \_\_\_\_\_ Wage/salary desired: \_\_\_\_\_ Date available: \_\_\_\_\_

Full time     Part time    If part time, how many hours per week? \_\_\_\_\_

I hereby give permission to contact the employers listed above concerning my prior work experience. Signature: \_\_\_\_\_

(If there is an employer you do not wish us to contact, please indicate here: \_\_\_\_\_)

**CERTIFICATION AND AGREEMENT**

I certify that all information on this application is true and correct. I also certify that I have accounted for all of my work experience and training on this application. It is my understanding that the company may make a thorough investigation of my entire work and personal history and may verify all data given in my application for employment, related papers, or oral interviews. I authorize such investigation and the giving and receiving of any information requested by the company and I release from liability any person giving or receiving any such information. I understand that falsification of data so given or other derogatory information discovered as a result of this investigation will prevent my being hired, or if hired, will subject me to immediate dismissal. I further understand that this is an application for employment and that no employment contract is being offered. I understand that if I am employed, such employment is for an indefinite period of time and that the company can change wages, benefits and conditions at any time. I further understand my employment can be terminated with or without cause and with or without notice at any time at the option of either the company or myself.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_