



Hulman & Company / Clabber Girl

Application For Employment



In Compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, or the presence of a non-job related medical condition or handicap.

This application will be effective for 60 days. Applicants must reapply thereafter if they wish to be considered for employment after this 60-day period expires.

Name _____ Social Security Number _____
Last First MI

Address _____
Street City

State Zip Phone

Email Address _____

Position applying for: _____ Rate of pay desired _____

Are you legally employable within the United States? Yes No

Have you ever been convicted of a crime, other than minor traffic offenses? _____

If so, please explain _____

Are there any reasons you may have difficulty in performing any of the essential elements of the job for which you have applied? _____ If so, please explain _____

Are you related to an employee currently working at this company? _____ If yes, name _____

How were you referred to this company? _____

EDUCATION

	Educational Institution	Level of Completion	Diploma / Degree / Licenses / Certificates
High School			
College			
Graduate Studies			
Other			

Describe any additional specialized training, apprenticeship or skills you may possess that would be considered relevant to employment: _____

EXPERIENCE AND QUALIFICATIONS

INDICATE TRAINING AND EXPERIENCE IN THE FOLLOWING:

Experience	Years of Experience	Specific Duties
Accounting / Bookkeeping		
Customer Service		
HR / Payroll		
Information Services		
Maintenance		
Manufacturing / Warehouse		
Purchasing		
Receptionist		
Restaurant / Food Service		
Sales / Marketing		
Other		

PREVIOUS EMPLOYMENT

Current Employer:

Address: _____

Supervisor _____

Position Held _____

From: _____

To: _____

Salary: _____

Reason For Leaving: _____

Previous Employer:

Address: _____

Supervisor _____

Position Held _____

From: _____

To: _____

Salary: _____

Reason For Leaving: _____

Previous Employer:

Address: _____

Supervisor _____

Position Held _____

From: _____

To: _____

Salary: _____

Reason For Leaving: _____

To Be Read and Signed by Applicant

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge. I understand that misrepresentations or false or omitted facts may result in my termination, regardless of the time of discovery by the Company. I also understand that, if hired, my employment is for no definite period and may be terminated at any time without written notice and that, absent a written contract by the President of the Company, I will remain an at-will employee and can be terminated at any time without any notice.

I authorize the Company to make such investigations and inquiries of my personal, employment or financial history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application.

I also understand that I am required to abide by all rules and regulations of the Company.

Date

Applicant's Signature

Check here if this application was completed by a person other than the applicant.

Signature of Person Completing Application