



## Employment Application

Crew is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state or federal law. Applicants requiring reasonable accommodation in the application and/or interview process should notify a representative of Crew.

*Please print and fill out all sections*

### Applicant Information:

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Street address: \_\_\_\_\_ City: \_\_\_\_\_ Zip code: \_\_\_\_\_

### Employment Positions:

Position(s) applying for: \_\_\_\_\_ Part-time \_\_\_\_\_ Full-time \_\_\_\_\_ Temporary \_\_\_\_\_  
(Mark an X on one of the above)

What days and hours are you available for work? \_\_\_\_\_

If hired, on what date can you start working? \_\_\_\_\_

Are you available to work overtime? Yes \_\_\_\_\_ No \_\_\_\_\_ Hourly Wage desired: \$ \_\_\_\_\_

### Personal Information:

Have you ever applied to or worked for Eberts Corporations before? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain (include date): \_\_\_\_\_

Do you have any friends, relatives, or acquaintances working for Eberts Corporations? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, state name and relationship: \_\_\_\_\_

If hired, would you have transportation to/from work? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you over the age of 18? Yes \_\_\_\_\_ No \_\_\_\_\_

If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the United States?  
Yes \_\_\_\_\_ No \_\_\_\_\_

If hired, are you willing to submit to and pass a controlled substance test? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?  
Yes \_\_\_\_\_ No \_\_\_\_\_ If no, describe the functions that cannot be performed: \_\_\_\_\_

(Note Crew complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. It is possible that a hire may be tested on skill/agility and may be subject to a medical examination conducted by a medical professional.)

Have you ever been convicted of a criminal offense (felony or misdemeanor)? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, please describe the crime-state nature of the crime(s), when and where convicted and disposition of the case. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

**Education, Training, and Experience**

High School Name: \_\_\_\_\_ City & State: \_\_\_\_\_ Years completed: \_\_\_\_\_  
Did you graduate? Yes \_\_\_\_ No \_\_\_\_ Month & Year Graduated: \_\_\_\_\_  
College/University: \_\_\_\_\_ City & State: \_\_\_\_\_ Years completed: \_\_\_\_\_  
Did you graduate? Yes \_\_\_\_ No \_\_\_\_ Month & Year Graduated: \_\_\_\_\_ Type of Diploma: \_\_\_\_\_  
Vocational School: \_\_\_\_\_ City & State: \_\_\_\_\_ Years completed \_\_\_\_\_  
Did you graduate? Yes \_\_\_\_ No \_\_\_\_ Month & Year Graduated: \_\_\_\_\_ Type of Diploma: \_\_\_\_\_  
Military: Branch \_\_\_\_\_ Rank: \_\_\_\_\_ Total Years of Service \_\_\_\_\_  
Skills/duties and related details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Current or most recent employer: Employed from \_\_\_\_\_ till: \_\_\_\_\_  
Name & Phone Number: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_  
Supervisor's Name & Phone number: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_ Final Hourly Rate: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Describe duties include any Licenses or special training you received: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2<sup>nd</sup> most recent employer: Employed from \_\_\_\_\_ till: \_\_\_\_\_  
Name & Phone Number: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_  
Supervisor's Name & Phone number: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_ Final Hourly Rate: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Describe duties include any Licenses or special training you received: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3<sup>rd</sup> most recent employer: Employed from \_\_\_\_\_ till: \_\_\_\_\_  
Name & Phone Number: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip Code: \_\_\_\_\_  
Supervisor's Name & Phone number: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_ Final Hourly Rate: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Describe duties include any Licenses or special training you received: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Applicant's Statement:**

The answers and statements, which I provided in this application, are true and complete to the best of my knowledge. I understand that Crew may investigate all statements contained in this application. I understand that any false or misleading information provided during the application or interview process will result in my immediate discharge, if I am hired, regardless of when discovered. I understand that this application is not a contract for employment. I understand that if hired, regardless of any oral representations to the contrary, the employment relationship between Crew and myself is terminable-at will so that both Crew and I remain free to choose to end our work relationship at any time for any or no reason. I understand that no representative of Crew has the authority to make any assurances to the contrary. I also understand that any changes in this employment relationship must be made in writing.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date