

APPLICATION FOR EMPLOYMENT



Applicant's Declaration, Authorization and Release
PLEASE READ THIS CAREFULLY BEFORE SIGNING BELOW.

My answers on this application and on any resume (if provided) are complete and true. I understand that the submission of any false or incomplete information in connection with my application whether on this or other documents or in interviews, will be cause for the rejection of my application or the termination of my employment at any time. I authorize Aspen Resource Partners and its agents to verify any information related to my application or resume. I also authorize individuals, schools, employers, and law enforcement or government officials to freely release any information concerning my background, and hereby release any and all of them from any liability for doing so. If Aspen Resource Partners employs me, I understand that I will be employed on an at-will basis for an indefinite period of time and that my employer may terminate my employment at any time and for any reason.

Aspen Resource Partners verifies eligibility for employment through the Social Security Administration and the Department of Homeland Security's E-Verify program. I understand that Aspen Resource Partners will not hire applicants who are unauthorized to work in the United States. If my eligibility is non-confirmed through the Department of Homeland Security, I understand that I will be notified by Aspen Resource Partners in writing and will be given the opportunity to contest the non-confirmation. I understand that all applicants must go through the employment verification process.

Print Name

Signature

Date

Aspen Resource Partners shall comply with appropriate federal and state laws and regulations prohibiting discrimination on grounds of race, color, gender, national origin, sexual preference, protected age category, religion or qualified disability.



APPLICATION FOR EMPLOYMENT

In order to properly evaluate your application, it is essential that all of the following questions be answered carefully and completely.

Personal Information

PLEASE PRINT

Name _____ Date _____

LAST

FIRST

MIDDLE INITIAL

Address _____

STREET

CITY

STATE

ZIP CODE

Address 2 _____

Telephone Number _____ Mobile Number _____

Social Security Number _____ Email Address _____

Are you 18 years of age or older? _____ If hired, you may be required to submit proof of age.

When are you available to begin working? _____ How were you referred to us? _____

Position Desired

POSITION DESIRED

Are you seeking FULL TIME or PART TIME Any Shift? Yes
 REGULAR or TEMPORARY No, only _____

Have you worked here before? _____ If yes, when? _____

Have you applied here before? _____ If yes, when? _____

Do you have any relatives already employed here? _____

For Driving Jobs Only: Do you have a valid Drivers License? Drivers License Number _____

Have you had your driver's license suspended or revoked in the last three years? _____

If yes, give details _____

Educational Background

Type of School	Name and Location	Number of Years Completed	Major	GPA	Degree Obtained	Date of Completion
High School Diploma or GED			N/A			
College						
Vocational or Other						

Employment Experience

List all of your current and previous positions (paid and unpaid) in chronological order starting with the most recent. Please account for all periods of time including military service and any period of unemployment. Please attach additional sheets as needed even if you submit a resume.

1. Employed From _____ To _____
Company Name _____ Your Title _____
Address _____ Salary _____
City & State _____ Supervisor's Phone Number _____
Supervisor's Name and Title _____
Work Performed _____
Reason for Leaving _____

May we contact your present employer? YES NO (circle)

2. Employed From _____ To _____
Company Name _____ Your Title _____
Address _____ Salary _____
City & State _____ Supervisor's Phone Number _____
Supervisor's Name and Title _____
Work Performed _____
Reason for Leaving _____

3. Employed From _____ To _____
Company Name _____ Your Title _____
Address _____ Salary _____
City & State _____ Supervisor's Phone Number _____
Supervisor's Name and Title _____
Work Performed _____
Reason for Leaving _____

Please list any additional special skills, technical or professional knowledge which you may have:

Other Questions

Emergency Contact Please list one person's name and phone number that we may contact in case of emergency

Have you ever been convicted of a felony? YES NO
If yes, give a short explanation of incident. Please indicate the date, nature and place of the incident, the disposition of the conviction. (An affirmative answer does not automatically eliminate you from consideration.)

Has your employment ever been terminated by a previous employer? YES NO
If yes, please provide a short explanation of the incident.

Has your employer ever reprimanded you for reasons relating to allegations of physical or sexual abuse or sexual harassment by you?
 YES NO
If yes, give a short explanation of the allegations. Please indicate the date, nature, and place of the allegations, the disposition of the allegations, and your employer at the time. (An affirmative answer does not automatically eliminate you from consideration.)

Are you able to perform the essential functions of the job (either with or without reasonable accommodation) as they have been explained to you? YES NO
If No, Please explain:

References: Please list two professional references and two personal references:

NAME	PHONE	RELATIONSHIP