



## EMPLOYMENT APPLICATION

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
Last First Middle

**Address:** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Telephone #** \_\_\_\_\_ **Alternate Phone #** \_\_\_\_\_ **Other#** \_\_\_\_\_

Have you ever been employed by this company or an affiliate before? ☐ Yes ☐ No

If Yes: Company \_\_\_\_\_ Department \_\_\_\_\_ Supervisor \_\_\_\_\_

Dates employed \_\_\_\_\_ to \_\_\_\_\_ Reason for Termination: \_\_\_\_\_

**Employment Desired:** ☐ **Seasonal (12hour Shifts)** ☐ Full Time ☐ Other

**Days/Hours Available to work:** \_\_\_\_\_

**Salary Desired \$** \_\_\_\_\_ **HR/YR** **Date you can begin:** \_\_\_\_\_

**Position/s applying for:** \_\_\_\_\_

Can you, at the time of employment, submit verification of your legal right to work in the United States? ☐ Yes ☐ No (Proof of identity & eligibility will be required upon offer of employment.)

If under the age of 18, can you provide required proof of your eligibility to work?

☐ Yes ☐ No

During the last ten years, have you ever been convicted of a crime other than a minor traffic offense? ☐ Yes ☐ No

If yes, explain: \_\_\_\_\_

Are you subject to any conditions of probation or parole? ☐ Yes ☐ No

If yes, explain: \_\_\_\_\_

*(A conviction will not automatically disqualify you for employment. Rather, such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered).*

**Education:**

EDUCATION TYPE OF SCHOOL	NAME AND ADDRESS OF SCHOOL	MAJOR SUBJECT	CIRCLE LAST YEAR ATTENDED	GRADUATED	DEGREE
HIGH SCHOOL			9 10 11 12	<input type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE			1 2 3 4	<input type="checkbox"/> YES <input type="checkbox"/> NO	
GRADUATE SCHOOL			1 2 3 4	<input type="checkbox"/> YES <input type="checkbox"/> NO	
BUSINESS, VOCATIONAL, TRADE OTHER			1 2 3 4	<input type="checkbox"/> YES <input type="checkbox"/> NO	

**SKILLS:**

\_\_\_CERTIFIED FORKLIFT \_\_\_CDL LICENSE \_\_\_DATA ENTRY

\_\_\_MICROSOFT OUTLOOK \_\_\_EXCEL \_\_\_MS WORD \_\_\_MICROSOFT OFFICE

OTHER\_\_\_\_\_

Do you have any relatives or friends who work for the company? \_\_\_Yes \_\_\_No

If Yes, Who\_\_\_\_\_ Department\_\_\_\_\_

\_\_\_\_\_

**Please answer the following questions:**

What are your career goals?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Where did you get the information about the position? \_\_\_\_\_

\_\_\_\_\_

Why are you interested in becoming an employee Neighbors LLC, Inc.? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Employment History, Including Military History — list most recent FIRST**

<b>Current/Most Recent Employer</b> _____ Supervisor _____			
Address _____		City, State, Zip _____ Telephone No. _____	
Last Position _____		Responsibilities: _____	
_____			
Dates of Employment ____/____ to ____/____		Starting Salary _____ Ending Salary _____	
Reason for Leaving _____			
May we contact this employer? _____ <input type="checkbox"/> Yes <input type="checkbox"/> No			

<b>Company Name</b> _____		Supervisor _____		Last Position _____	
Address _____		City, State, Zip _____		Telephone No. _____	
Responsibilities _____		_____			
_____		_____			
Dates of Employment ____/____ to ____/____		Starting Salary _____		Ending Salary _____	
Reason for Leaving _____					

<b>Company Name</b> _____		Supervisor _____		Last Position _____	
Address _____		City, State, Zip _____		Telephone No. _____	
Responsibilities _____		_____			
_____		_____			
Dates of Employment ____/____ to ____/____		Starting Salary _____		Ending Salary _____	
Reason for Leaving _____					

<b>Company Name</b> _____		Supervisor _____		Last Position _____	
Address _____		City, State, Zip _____		Telephone No. _____	
Responsibilities _____		_____			
_____		_____			
Dates of Employment ____/____ to ____/____		Starting Salary _____		Ending Salary _____	
Reason for Leaving: _____					

<b>Company Name</b> _____		Supervisor _____		Last Position _____	
Address _____		City, State, Zip _____		Telephone No. _____	
Responsibilities _____		_____			
_____		_____			
Dates of Employment ____/____ to ____/____		Starting Salary _____		Ending Salary _____	
Reason for Leaving: _____					

## **Certification and Authorization**

I certify that the above information is true and correct. I understand that, in the event of my employment by Neighbors, LLC., I shall be subject to dismissal if any information that I have given in this application is false or misleading or if I have failed to give any information herein requested, regardless of the time elapsed after discovery.

I understand that drug and alcohol tests may be administered as a condition of employment, in reasonable suspicion, and post-accident. Applicants who test positive for drugs or alcohol, who fail to provide specimens or attempt to contaminate specimens will not be eligible for employment.

I authorize the company to inquire into my educational, professional and past employment history references as needed to research my qualifications for this position. I hereby give my consent to any former employer to provide employment-related information about me to Neighbors, LLC and will hold Neighbors, LLC. and my former employer harmless from any claim made on the basis that such information about me was provided or that any employment decision was made on the basis of such information. I further authorize Neighbors, LLC to obtain any credit and consumer checks, and obtains a copy of my Louisiana Official Driving Record.

I understand that nothing in this employment application, the granting of an interview or my subsequent employment with the company is intended to create an employment contract between myself and Neighbors, LLC. under which my employment could be terminated only for cause. On the contrary, I understand and agree that, if hired, my employment could be terminated at will and may be terminated by Neighbors, LLC. or me at any time and for any reason. I understand that no person has any authority to enter into any agreement contrary to the foregoing.

If employed, I will be required to provide original documents, which verify my identity and right to work in the United States under the Immigration Reform and Control Act (IRCA) of 1986.

I hereby acknowledge that I have read and agree to the above statements.

Signature \_\_\_\_\_ Date: \_\_\_\_\_

**Neighbors, LLC, Inc. is an Equal Opportunity Employer. We will consider applicants on the basis of qualifications and without regard to race, color, religion, creed, national origin, sex, age, ancestry, marital status, and disability, veteran or draft status.**