## Andiamo

OFFICE USE ONLY

Date received:

Reviewed by:

## Application for Employment

All information must be completed to be considered for employment. Attach a resume if available.

Tor emproyment. Theath a resume is				
			Date:	
Name:				
Last	First		Middle	
Present Address:				
Number Street		City	State	Zip
How long at current address:				
Telephone: ( )(day time)	( )	(evening)		
Are you over 18 years of age?YesNo If NO, can you provide proof of your eligibility to	to work?Yes	_No		
Can you, after employment, submit verificatio.  Yes No. (Proof of eligibility will be required)		to work in the Uni	ted States?	
Employment desired: $\Box$ Full-time only $\Box$ Par	t-time only	or Part-time		
What days are you available?  All M T W Th F Sa Su	How many hou	rs are you looking	; to work	
Day		per week?		
Eve		(We consid	er 30+ hours/we	eek full time)
Position applied for:				
When are you available to start work?				
Do you have a valid driver's license?Yes	No			
Have you ever applied with our organization but If yes, state for what position and approximate		_No		

Type of School	Name of School	Location (address)	# of Years Completed	Major and Degree
High School				
College				
Bus. or Trade School				
Professional School				

committed.	g to conviction(s), and now re	ecently such offense(s) was	s/were
Please list your work experience beginni acceptable response.	ng with your most recent jo	bb held. "See resume" is	s not an
Name And Address Of Previous Employer	Period Of Employment (Month - Year)	Complete The Following	Reason For Leaving
Company	From	Kind Of Business	
Address	То	Position	
City	Supervisor's Name/Pho	ne #	Pay or Salary
	o. If no, state reason why:		
Duties:  May we contact for reference:YesNo  Name And Address Of Previous  Employer	Period Of Employment (Month - Year)	Complete The Following	Reason For Leaving
May we contact for reference: Yes No  Name And Address Of Previous  Employer	Period Of Employment	Complete The	
May we contact for reference: Yes No	Period Of Employment (Month - Year)	Complete The Following	
May we contact for reference:YesNo  Name And Address Of Previous  Employer  Company	Period Of Employment (Month - Year) From	Complete The Following  Kind Of Business  Position	
May we contact for reference:YesNo  Name And Address Of Previous  Employer  Company  Address	Period Of Employment (Month - Year) From	Complete The Following  Kind Of Business  Position	Leaving
May we contact for reference:YesNo  Name And Address Of Previous  Employer  Company  Address	Period Of Employment (Month - Year) From	Complete The Following  Kind Of Business  Position	Leaving

May we contact for reference: \_\_Yes \_\_No. If no, state reason why: \_\_\_\_

Name And Address Of Previous Employer	Period Of Employment (Month - Year)	Complete The Following	Reason For Leaving
Company	From	Kind Of Business	
Address	То	Position	
City	Supervisor's Name/Pho	Supervisor's Name/Phone #	
Duties:			
May we contact for reference:YesNo	o. If no, state reason why:		
Additional Experience or Qualifications: List a volunteer experience, which you believe quapplying for and should be considered in every supplying for an experience.	alify you to perform job-relate	d functions in the position y	
Why do you want to work at Andiamo?			
Please list two additional references other th	an relatives		
Name:	Name:		
Title:	Title:		
Company:	Company:		
Address:	Address:		
Phone:	Phone:		

## **Applicants Certification and Agreement**

As an indication that you have read and understood these statements, please write your

initials in the spaces provided below, and sign and date application.
I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Andiamo to hire me.
If I am hired, I understand that Andiamo is an "at will" employer. "At will" employment means that either Andiamo or I have the right to terminate employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Andiamo has the authority to make any assurance to the contrary.
I attest with my signature below that I have given to Andiano true and complete information on this application. No requested information has been concealed. I understand that any misrepresentations in this application or any attachment, or any omission of material facts is grounds for denial of employment or immediate dismissal if not discovered by Andiano until after my becoming employed.
I hereby give Andiamo permission to contact schools, all previous employers (unless otherwise indicated), references, and others, and hereby release Andiamo from any liability as a result of such contact. Further, I release the above mentioned references from any and all liability for any damages that may result from information collected by Andiamo.

## **Equal Opportunity Employer**

Date

**Applicant Signature** 

Andiamo is committed to a policy of equal employment opportunity, and does not discriminate in the terms and conditions of employment because of race, age, sex/gender, religion, color, national origin, creed, sexual orientation, veteran status, pregnancy, citizenship status, physical or mental disability, genetic information and any other factor protected by law.

This application is valid only for 60 days from the date signed/dated above. If you have not been offered employment within 60 days of your application, it will be necessary for you to submit another application.