



HR ONLY!
Reviewer: _____
Rev. Date: _____

Employment Application

Equal Opportunity Policy

RFI, LLC is an Equal Opportunity employer.

No employee of the company will discriminate against an applicant for employment or a fellow employee because of race, creed, color, religion, sex, national origin, ancestry, age or any physical or mental disability. No employee of the company will discriminate against any applicant or fellow employee because of the person's veteran status.

This policy applies to all employment practices and personnel actions including advertising, recruitment, testing, screening, hiring, selection for training, upgrading, transfer, demotion, layoff, termination, rates of pay and other forms of compensation or overtime.

Programs, services, and employment are equally available to everyone. Please inform the Human Resources Department if you require reasonable accommodation for the application or interview.

Position Applied for: _____	Date of Application: _____
How were you referred to us: _____	

Applicant Information:

** PLEASE PRINT CLEARLY!*

Full Name (Last, First, Middle):								
Address:								
Drivers Lic. #		State:		Valid	Yes	or	No	
Explain Invalid ID								
Phone:		Mobile/Pager/Other:						
Email:								
Date Available to Start:								
Social Security #:		Wage Requested:						
If you are under 18 and we require a work permit, can you furnish one?					Yes:		No:	
If no, please explain:								
Have you ever worked for this company?				Yes:		No:		
If yes, when?								
Are you a citizen of the United States?				Yes:		No:		
If not, are you legally allowed to work in the United States?				Yes:		No:		
Type of employment desired: (Check All That Apply)								
Full-Time:	<input type="checkbox"/>	Part-Time:	<input type="checkbox"/>	Temporary:	<input type="checkbox"/>	Seasonal: (List Time Period)	<input type="checkbox"/>	

Have you ever pled "guilty," "no contest," or been convicted of a crime?	Yes:		No:	
If yes, give dates and details:				
Answering "yes" to these questions does not constitute an automatic rejection for employment. Date of the offense, seriousness and nature of the violation, rehabilitation, and position applied for will be considered.				

Summarize Your Special Skills or Qualifications:

Previous Employment (begin with most recent position):

If you need a supplement sheet, to include more employment information you may obtain one from the person handling your application. PRINT CLEARLY!

Dates of Employment: From _____ to _____
Position(s) Held: _____
Firm: _____
Address: _____
Phone: _____
Supervisor: _____ Title: _____
Responsibilities: _____
Starting Wage and Position: _____
Ending Wage and Position: _____
Reason for leaving: _____
May we contact this employer as a reference?

Dates of Employment: From _____ to _____
Position(s) Held: _____
Firm: _____
Address: _____
Phone: _____
Supervisor: _____ Title: _____
Responsibilities: _____
Starting Wage and Position: _____
Ending Wage and Position: _____
Reason for leaving: _____
May we contact this employer as a reference?

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial, and other related matters as may be necessary for an employment decision.

I hereby release employers, schools, or individuals from all liability when responding to inquiries in connection with my application.

In the event I am unemployed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: _____ **Date:** _____

Employment History Supplement Sheet

Name: _____

(Please attach to the Employment Application)

Dates of Employment: From _____ to _____
Position(s) Held: _____
Firm: _____
Address: _____
Phone: _____
Supervisor: _____ Title: _____
Responsibilities: _____
Starting Wage and Position: _____
Ending Wage and Position: _____
Reason for leaving: _____
May we contact this employer as a reference?

Dates of Employment: From _____ to _____
Position(s) Held: _____
Firm: _____
Address: _____
Phone: _____
Supervisor: _____ Title: _____
Responsibilities: _____
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