



## EMPLOYMENT APPLICATION

APPLICANT INFORMATION					
Last Name		First		M.I.	Date
Street Address				Apartment/Unit #	
City		State		ZIP	
Phone		E-mail Address			
Date Available		<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time		Salary Expectation	
Position Applied for:					
Can you perform the essential functions of the position for which you are applying? <span style="float: right;">YES <input type="checkbox"/>    NO <input type="checkbox"/></span>					
If NO, please explain. (If you have any question as to what functions are applicable to the position for which you are applying, please ask the interviewer before you answer this question): _____					
Are you eligible to work in the U.S? <span style="float: right;">YES <input type="checkbox"/>    NO <input type="checkbox"/></span>					
Have you ever worked for this company?    YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when?					
How did you hear about us? _____			Can you read and write English? Yes    No		
Do you know anyone who works for our company?    Yes                  No			Can you work any shift? Yes    No		
If yes, who? _____			Can you work overtime (including weekends)? Yes    No		
EDUCATION					
High School			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
REFERENCES					
<i>Please list three professional references.</i>					
<b>Full Name</b>			Relationship		
Company			Phone (    )		
Address					
<b>Full Name</b>			Relationship		
Company			Phone (    )		
Address					
<b>Full Name</b>			Relationship		
Company			Phone (    )		
Address					



**APPLICANTS:**

Have you ever been terminated from employment or asked to resign by an employer? YES  NO

**If yes,** please provide company names and details:

**MILITARY SERVICE**

Branch	From	To
Rank at Discharge		

**DISCLAIMER AND SIGNATURE**

**Please read carefully before signing.**

ABACORP is an equal opportunity employer. ABACORP does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex, sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service (For any applicable states, or based upon sexual orientation, gender identity and or gender expression).

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for ABACORP to hire me. If I am hired, I understand that either ABACORP or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of ABACORP has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to ABACORP true and complete information on this application. No requested information has been concealed. I authorize ABACORP to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Signature	Date
-----------	------