



RICHARDSON®

APPLICATION FOR EMPLOYMENT

RICHARDSON IS AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE AGAINST OTHERWISE QUALIFIED APPLICANTS ON THE BASIS OF RACE, COLOR, CREED, RELIGION, ANCESTRY, AGE, SEX, MARITAL STATUS, NATIONAL ORIGIN, DISABILITY OR HANDICAP, OR VETERAN STATUS.

PERSONAL INFORMATION

Name: _____ Date: _____
LAST FIRST MIDDLE

Address: _____
STREET CITY STATE ZIP

Phone: _____ Email: _____

Are you legally eligible for employment in the United States? Yes No
(IF OFFERED EMPLOYMENT, YOU WILL BE REQUIRED TO PROVIDE DOCUMENTATION TO VERIFY ELIGIBILITY)

EMPLOYMENT DESIRED

Position(s) Applying For: _____

Available Start Date: _____ Shift: Days Swing Any Available

Available to Work: Full-Time Part-Time Other _____

Currently Employed? _____ If so, may we contact your current employer? _____

Have you applied with Richardson before? Yes When? _____ No

This application for employment is good for 1 year only. Consideration for employment after 1 year requires a new application.

EDUCATION

High School: _____ City/State: _____

Grade Completed: (SELECT ONE) 9 10 11 12 Diploma: Yes No GED: Yes No

College: _____ Major: _____

Number of years completed: (SELECT ONE) 1 2 3 4 Degree Earned? Yes No

GENERAL

Subjects of Special Interests or Study: _____

Additional Skills: _____

Have you ever had any job-related training in the United States military? Yes No

Do you have any conditions which affect your ability to operate moving machinery, stand all day, or work seated for any position that you are applying for?

If yes, please explain: _____

FORMER EMPLOYERS

Start with your present or most recent position. Continue with all past employment (attach additional sheet(s) if necessary).

1. Company Name: _____ Employment Dates: _____

Position: _____ Reason for Leaving: _____

2. Company Name: _____ Employment Dates: _____

Position: _____ Reason for Leaving: _____

3. Company Name: _____ Employment Dates: _____

Position: _____ Reason for Leaving: _____

Have you ever been discharged from an employer or asked to resign? Yes No

If yes, please explain: _____

REFERENCES: Provide the name and phone # of three persons not related to you, whom you have known for at least one year.

1. _____

2. _____

3. _____

HOW DID YOU LEARN ABOUT RICHARDSON? Radio Ad Walk-In Friend

Current Employee (NAME) _____ Online Ad (Indeed, etc.) Other _____

I certify that the answers given herein are true and complete to the best of my knowledge. I also authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is "at will", which means that the employee may resign at any time and the employer may discharge the employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written documentation or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature: _____ Date: _____