



## Application for Employment

### Equal Employment Opportunity Statement:

Employment decisions will be based on the principles of equal opportunity. All personnel actions (recruiting, hiring, training, promotion, compensation, etc.) are administered without regard to any characteristic protected by state, federal, or local law, assuming said characteristic does not interfere with the performance of essential job functions. Reasonable accommodations will be made for disabilities and religious beliefs. Please inform us of any necessary accommodations needed to the application process.

### Please Print

Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Position Applying For: \_\_\_\_\_ Date of Application: \_\_\_\_\_

How did you learn of this opening? \_\_\_\_\_

Have you applied for a position with us before? ☐ NO ☐ YES - Specify date: \_\_\_\_\_

Have you ever been employed with us before? ☐ NO ☐ YES - Specify date and position: \_\_\_\_\_

Are you currently employed? ☐ YES ☐ NO

On what date would you be available for work? \_\_\_\_\_

Are you available to work: ☐ Part-time ☐ Temporary/Seasonal

Are you legally permitted to work in the United States? ☐ YES ☐ NO

*NOTE: Proof of eligibility will be required within three working days of employment.*

Are you 18 years of age or older? ☐ YES ☐ NO

Have you been convicted of a felony within the last 7 years? ☐ NO

*NOTE: Such conviction does not necessarily prevent you from employment.* ☐ YES - Explain: \_\_\_\_\_

Have you ever gone by a name other than the one listed above? ☐ NO ☐ YES - Please list: \_\_\_\_\_

## EDUCATION

High School/Other: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

College: \_\_\_\_\_ Years Attended/Graduation Date: \_\_\_\_\_

College: \_\_\_\_\_ Years Attended/Graduation Date: \_\_\_\_\_

Other Training/Education: \_\_\_\_\_

## MILITARY SERVICE

Have you ever served in the U.S. military? \_\_\_\_ NO \_\_\_\_ YES

*NOTE: If you answered "no" to the above question, please skip the rest of this section.*

What was the length of your military service? Years \_\_\_\_\_ Months \_\_\_\_\_

What was your rank at time of discharge?

What type of training and work experience did you receive while in the military?

## EMPLOYMENT HISTORY

(Start with most recent employer)

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Starting Pay: \_\_\_\_\_ Starting Position: \_\_\_\_\_

Date Ended: \_\_\_\_\_ Ending Pay: \_\_\_\_\_ Ending Position: \_\_\_\_\_

Supervisor: \_\_\_\_\_ May we contact? \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ Later

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Starting Pay: \_\_\_\_\_ Starting Position: \_\_\_\_\_

Date Ended: \_\_\_\_\_ Ending Pay: \_\_\_\_\_ Ending Position: \_\_\_\_\_

Supervisor: \_\_\_\_\_ May we contact? \_\_\_\_ Yes \_\_\_\_ No \_\_\_\_ Later

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Starting Pay: \_\_\_\_\_ Starting Position: \_\_\_\_\_

Date Ended: \_\_\_\_\_ Ending Pay: \_\_\_\_\_ Ending Position: \_\_\_\_\_

Supervisor: \_\_\_\_\_ May we contact? \_\_\_ Yes \_\_\_ No \_\_\_ Later

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

## REFERENCES

Name	Phone Number	Years Known
_____	_____	_____
_____	_____	_____
_____	_____	_____

## ADDITIONAL INFORMATION

You may exclude information, which would reveal sex, race, religion, national origin, age, color, disability, sexual orientation, or other protected status.

Awards or Honors Received:

Professional or Civic Activities:

Licenses or Certifications:

Activities or Sports You Participate(d) In:

Do you have any foreign language skills? \_\_\_ NO \_\_\_ YES - Specify:

Can you perform all necessary job functions with or without reasonable accommodations? \_\_\_\_ NO \_\_\_\_ YES

## APPLICANT'S STATEMENT

I certify that the information provided in this application is true, to the best of my knowledge.

I understand that providing false or misleading information at any time during the application and interview process may lead to refusal to hire or discharge from Harley's Bicycles. If I become employed by Harley's Bicycles, I agree to follow all rules and regulations of Harley's Bicycles as they develop and change.

I allow Harley's Bicycles to conduct investigations on me, my background, and my performance, and am aware that such investigations will become a part of my employment record. With this, I authorize Harley's Bicycles to speak with acquaintances, personal and professional, to gather information about me.

I authorize all former employers and references to provide any information about me to Harley's Bicycles and release them of liabilities and damages of all kinds for providing this information. I authorize Harley's Bicycles to verify the accuracy of the information within this application. I also authorize the release of my educational transcripts to Harley's Bicycles for education verification purposes.

I release Harley's Bicycles from liability for collecting information about me and using it to make employment decisions.

If I become employed by Harley's Bicycles, I understand that the employment relationship will be "at will," and that the "at will" status may not change at any time unless specifically approved, in writing, by the owner of Harley's Bicycles.

I agree that if I become indebted to Harley's Bicycles, I will be responsible for repaying the total owed upon termination from the Company. If I do not repay the sum prior to my final paycheck being received, the money owed will be deducted from my pay.

This application for employment is valid for the next 90 days. I understand that if I wish to be considered for employment after this period of time, I must apply again.

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