

Sunstar Application for Employment

Sunstar's policy is to provide equal opportunity to all qualified person without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

Date: _____

Last Name _____ First Name _____ Middle Name _____

Street Address _____

City _____ State _____ Zip _____

Telephone _____ Social Security # _____

Position Applied For: _____

How did you hear of this opening? _____

When can you start? _____ Desired Wage \$ _____

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis (You may be required to provide documentation.) YES NO

Are you looking for full-time employment? YES NO

If no, what hours are you available: _____

Are you willing to work swing shift? YES NO

Are you willing to work overtime? YES NO

Have you ever been convicted of a felony? (This will not necessarily affect your application.)

YES NO Date of Conviction: _____

If Yes, please describe conditions: _____

Education

	School Name and Location	Year	Major	Degree
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High School	_____	_____	_____	_____
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College	_____	_____	_____	_____
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College	_____	_____	_____	_____
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Post-College	_____	_____	_____	_____
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Other Training	_____	_____	_____	_____
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In addition to your work history, are there other skills, qualifications, or experience that we should consider:

Employment History (Start with most recent employer)

Company Name _____

Address _____ Telephone # _____

Date Started _____ Starting Wage _____ Starting Position _____

Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____

May we Contact? YES NO

Responsibilities: _____

Reason for leaving _____

Company Name _____

Address _____ Telephone # _____

Date Started _____ Starting Wage _____ Starting Position _____

Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____

May we Contact? YES NO

Responsibilities: _____

Reason for leaving _____

Company Name _____

Address _____ Telephone # _____

Date Started _____ Starting Wage _____ Starting Position _____

Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____

May we Contact? YES NO

Responsibilities: _____

Reason for leaving _____

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal.

Sunstar is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. Employee may be required to submit to random drug testing in case of accident or by request of manager.

Signature: _____ Date _____