



The HOPE Chest of PEKIN

Employment Application

Applicant Information:

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment / Unit #

City State ZIP Code

Phone: _____ Email: _____

Date Available: _____ Desired Salary: \$ _____ Date of Birth _____

What Position* are you applying for? _____

***Truck Driver Applicant** will need to provide MVR and take a drug screen and physical exam before being hired.

*Do you have a valid Driver's License YES NO *Are you 25+ yrs with good driving record YES NO
For Driver Applicants

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

Are you able to lift 50 lbs. or more? YES NO Are you 16 years of age or older? YES NO

Availability Chart (Mark when you are available)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
AM						
PM						

References:

Please list two professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

References continued:

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment:

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO**Additional Employers:** _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service:

Branch: _____ From: _____ To: _____ Rank at discharge: _____

Type of Discharge: _____ If other than honorable, explain: _____

Disclaimer and Signature:

I certify that my answers are true and complete to the best of my knowledge. I give my permission for the HOPE Chest personnel to call all references and former employees. _____ initial

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. _____ initial

Yes I understand and comply to take a drug screening prior to employment with the HOPE Chest. A physical exam may be required for some positions. _____ initial

Signature: _____ Date: _____

Printed Name: _____

