

Personal Information			
Last	First	MI	Email
Street Address	City	ST	Zip
Primary Phone			
Are you legally able to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No	
When could you begin employment?			
Have you been convicted of a felony or been incarcerated in connection with a felony in the past seven years? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please explain:	
Are you in the military? <input type="checkbox"/> Yes <input type="checkbox"/> No Which branch?		Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have a valid drivers license? <input type="checkbox"/> Yes <input type="checkbox"/> No		Do you possess a Comercial Drivers License (CDL)? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes what if any endorsements do you have?			
What position are you applying for?		How did you hear about this position?	
		If you were refered to us, by whom?	
Desired Hourly Rate	Desired Weekly Earnings	Have you ever applied for employemnt with our firm? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Prior Work Experience (Please fill out as much as possiable.)									
	Current or Most Recent				Prior				Prior
Employer									
Address									
City, ST, ZIP									
Telephone									
Immediate Supervisor									
Dates of Employment	From	To	From	To	From	To	From	To	
Position/Job Title									
Wage / Salary	Starting	Ending	Starting	Ending	Starting	Ending	Starting	Ending	
Reason for Leaving									
May We Contact	<input type="checkbox"/> Yes <input type="checkbox"/> No				<input type="checkbox"/> Yes <input type="checkbox"/> No				<input type="checkbox"/> Yes <input type="checkbox"/> No

Education							
	Name/Location		Last Year Complete		Degree	Major or Emphasis	
High School			9	10	11	12	
College/University			1	2	3	4	
Trade School							
Other							
Other special skills, training, abilities or proficiencies.							

References (Work references are desired.)			
	Reference 1	Reference 2	Reference 3
Name			
Telephone			
Company Name			
Relationship			

**Please read the following statement and sign below.**

RL Ruff Inc. is an equal opportunity employer. RL Ruff Inc. does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex, gender, sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service.

I understand that neither the completion of this application nor any other part of my consideration for employment any obligation for RL Ruff Inc. to hire me. If I am hired, I understand that either RL Ruff Inc. 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 [Company Name] has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to RL Ruff Inc. true and complete information on this application. No requested information has been concealed. I also understand that RL Ruff Inc. may request to contact references provided for employment reference checks, and under consistent hiring practices, may require pre-employment screening and background verification as a condition of employment upon any employment offer. 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	Written Name	Date
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