



## Employment Application

Dale's Pharmacy is an equal opportunity employer. Dale's Pharmacy policy is to provide employment training, compensation, promotion, and other conditions of employment without regard to race, color, religion, sexual orientation, national origin, sex, age, disability, veteran status, or any other legally protected status.

<b>APPLICANT INFORMATION</b>			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City		State	ZIP
Phone (cell)		E-mail Address	
Date Available	Position Applied for		Desired Salary
Are you a citizen of the United States?    YES <input type="checkbox"/> NO <input type="checkbox"/> If no, are you authorized to work in the U.S.?    YES <input type="checkbox"/> NO <input type="checkbox"/>			
Have you ever worked for this company?    YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when?			
Have you ever been convicted of a felony?    YES <input type="checkbox"/> NO <input type="checkbox"/> If yes, explain			
How did you hear about us?			

<b>EDUCATION</b>			
High School		City, state:	
From	To	Did you graduate?    YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		City, state:	
From	To	Did you graduate?    YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		City, state:	
From	To	Did you graduate?    YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

<b>REFERENCES</b>	
<i>Please list two professional references.</i>	
Full Name	Relationship
Company	Phone (    )
Address	
Full Name	Relationship
Company	Phone (    )
Address	

**PREVIOUS EMPLOYMENT (MOST CURRENT FIRST)**

Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.  
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature	Date
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