

# CHET JOHNSON DRUGS, INC.

Employment Application



APPLICANT INFORMATION													
Last Name			First			M.I.		Date					
Street Address						Apartment/Unit #							
City			State			ZIP							
Phone			E-mail Address										
Date Available			Social Security No.			Desired Salary							
Position Applied for <small>(specify Chet's, Ellie's or JD@ARMC)</small>													
Days and Hours Available for work													
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						
Requirement for hours of availability:			Are you 18 years of age or older ?		<input type="checkbox"/> YES <input type="checkbox"/> NO								
			Are you 16 years of age or older?		<input type="checkbox"/> YES <input type="checkbox"/> NO								
			Are you 14 years of age or older?		<input type="checkbox"/> YES <input type="checkbox"/> NO								
EDUCATION													
Grammar School			City/State										
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			
Subjects of special studies:													
REFERENCES													
<i>Please list three professional references.</i>													
Full Name					Relationship								
Company					Phone (     )								
Address													
Full Name					Relationship								
Company					Phone (     )								
Address													
Full Name					Relationship								
Company					Phone (     )								
Address													

<b>PREVIOUS EMPLOYMENT</b>									
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"/>			
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"/>			
Chet Johnson Drugs, Inc. is an equal opportunity employer. It is policy that all individuals are entitled to equal employment opportunity regardless of race, color, religion, sex, national origin, age or disability, as required by state and federal law. If you are physically unable to fill out this application, you may request reasonable accommodations in completing the form. Supplements may be attached if necessary but will not be returned to applicant. Incomplete applications MAY NOT BE CONSIDERED. This form is an application for employment and is not a promise of employment.									
<b>OTHER INFORMATION:</b>									
Special Training <small>(indicate if you have worked in customer service, healthcare, computer or cash register experience and HIPPA trained)</small>									
Activities (Civic, Athletic, etc.)*									
<small>* Exclude organizations whereby the name or character of which indicates the race, creed, sex, marital status, age, color, or national origin of its members</small>									
<b>DISCLAIMER AND SIGNATURE</b>									
I authorize investigation of all statements contained in this application. If this application leads to employment, I understand that omission of facts, false or misleading information in my application or interview may result in my release.									
Signature						Date			