

Brayton Purcell LLP

APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer and will not discriminate on the basis of race, color, sex, religion, gender, gender identity, national origin, age, disability, marital or veteran status, or any other legally protected status.

(PLEASE PRINT)

POSITION(S) APPLIED FOR		DATE OF APPLICATION	
HOW DID YOU LEARN ABOUT US?			
School _____		Agency _____ Website _____	
Friend _____		Other _____	
LAST NAME		FIRST NAME	MIDDLE NAME
ADDRESS		CITY	STATE ZIP
Phone:		E-mail:	

Are you at least 18 years of age?..... yes no

Have you ever filed an application with us before?..... yes no
If yes, give date _____

Have you ever been employed with us before?..... yes no

Do any friends or relatives work here?..... yes no
If yes, their name and relationship to you _____

Are you currently employed?..... yes no

May we contact your present employer?..... yes no

Are you a U.S. citizen, or legally authorized to work in the United States? *Proof of citizenship or immigration status will be required upon employment.*..... yes no

Date available for work ____/____/____ Desired salary range _____

Are you available to work: Full-Time (please indicate mornings/ afternoons/ evenings)
Part-Time
Temporary (please indicate dates available _____ - _____)

Can you travel if a job requires it?..... yes no

Have you served active duty in the U.S. Armed Forces, or in the last two years worked for the U.S. Government as a civilian or military employee?..... yes no

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EDUCATION

	Name and Address of School	Course of Study	No. of Years Completed	Diploma/Degree
High School				
College				
College				
Trade School or Apprenticeship				
Other (Specify				

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job-related training received in the United States military.

List professional, trade, business or civic activities and offices held.
You may exclude memberships which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

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EMPLOYMENT EXPERIENCE

Start with your present or most recent job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1.

EMPLOYER	PHONE NUMBER	POSITION
ADDRESS		WORK PERFORMED
SUPERVISOR / TITLE		
DATES EMPLOYED		
FROM	TO	
REASON FOR LEAVING		

2.

EMPLOYER	PHONE NUMBER	POSITION
ADDRESS		WORK PERFORMED
SUPERVISOR / TITLE		
DATES EMPLOYED		
FROM	TO	
REASON FOR LEAVING		

3.

EMPLOYER	PHONE NUMBER	POSITION
ADDRESS		WORK PERFORMED
SUPERVISOR / TITLE		
DATES EMPLOYED		
FROM	TO	
REASON FOR LEAVING		

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ADDITIONAL INFORMATION

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

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Software (check all that apply)

<input type="checkbox"/> WordPerfect	<input type="checkbox"/> PC/Mac	Please list other software _____
<input type="checkbox"/> Excel	Typing wpm _____	
<input type="checkbox"/> Adobe	Alpha/Numeric KPH _____	

State any additional information you feel may be helpful to us in considering your application.

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Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodations?..... yes no
If no, please describe the functions that cannot be performed.

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References (List three people, preferably supervisors or managers, who have direct knowledge of your work performance)

1.

NAME	PHONE	EMAIL
COMPANY	RELATIONSHIP	

2.

NAME	PHONE	EMAIL
COMPANY	RELATIONSHIP	

3.

NAME	PHONE	EMAIL
COMPANY	RELATIONSHIP	

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APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by any authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Employer.

Signature of Applicant

Date