

We are an Equal Opportunity Employer and committed to excellence through diversity.

Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

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Name						
Address	City	State	Zip			
Phone number	Email address					
Are you legally eligible to work in the US? Yes \(\subseteq \text{No} \subseteq \text{No} \subseteq \text{.}	If selected for employment Yes ☐ No [a background check?				
Position you are applying for	Employment desired	Available start date				
Employment History						
Employer (1)	Job title	Dates employed	Starting pay rate			
Work phone	Reason for leaving		Ending pay rate			
Address	City	State	Zip			
Employer (2)	Job title Dates employed		Starting pay rate			
Work phone	Reason for leaving		Ending pay rate			
Address	City	State	Zip			
Employer (3)	Job title	Dates employed	Starting pay rate			
Work phone	Reason for leaving	Ending pay rate				
Address	City	State	Zip			
Employer (4)	Job title Dates employed		Starting pay rate			
Work phone	Reason for leaving		Ending pay rate			
Address	City	State	Zip			
May we contact the above employers? Yes \(\square\) No \(\square\) If "No", please indicate which one(s) you do not wish us to contact.						

Special Skills and Qualifications						
Education						
School name	Location	Years attended	Degree received	Major		
References (business and professional only)						
Name		Title	Company	Phone		
Miscellaneous Information						
Have you been convicted of a crime in the past 7 years, excluding misdemeanors and summary offenses, which has not been annulled,						
expunged, or sealed by a court? (A conviction record will not necessarily be a bar to employment.) Yes No						
If "Yes" please explain and describe in full detail:						
Applicant's Certification - Please read carefully before signing.						
I certify that the above answers given by me to the foregoing questions and the statements made by me in this application are correct and complete. I understand that, if I become employed, a misrepresentation or omission of face in this application may result in my discharge from employment.						
I authorize Shannon Hardware, as part of its evaluation of my suitability for employment, to contact all school officials, references, and my previous supervisors to secure information concerning my skills, character and ability.						
I further acknowledge and agree that no manager or representative of Shannon Hardware has any authority to enter into any employment agreement.						
I understand and agree that, if I am employed, I will be an at-will employee and Shannon Hardware may terminate my employment at any time and for any or no reason without prior notice.						
Name (please print)		Signature				
Date						