



Application for Employment

Equal Employment Opportunity

Dexter is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, religion, sex, national origin, age, disability, sexual orientation, marital status or any other legally protected class law. Applicants with disabilities, may, consistent with the Americans with Disabilities Act, request accommodations needed to participate in the application process.

Personal Information

Date: _____ Social Security Number: _____

Name: _____
Last First Middle Initial

Present Address: _____
Street City State Zip

Mailing Address: _____
Street City State Zip

Phone Number: (_____) _____ Are you 18 years of age or older? Yes No
Area Code

Employment Desired

Position: _____

How or by whom were you referred? _____ Date available: _____

Type of hours Full- time Part- time *Days *Nights *Hours: _____

Are there any days or hours you are unable or unwilling to work? Yes No If yes, please specify: _____

Are you employed now? Yes No If so, may we inquire of your present employer? Yes No

Have you ever applied to Dexter before? Yes No If yes, when? _____

Have you ever worked at Dexter before? Yes No If yes, when? _____

Do you have any relatives currently working at Dexter? Yes No If so, whom? _____

Are you a U.S. Citizen or an alien legally authorized to work in the United States? Yes No

Proof of legal authorization to work will be required upon employment.

Education

Name and Location of School Circle Last Year Did you Graduate? Subjects Studied & Degree(s) Received

	Name and Location of School	Circle Last Year	Did you Graduate?	Subjects Studied & Degree(s) Received
High School	_____	1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
College/University	_____	1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade, Business or Correspondence School	_____	1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Additional Information

Do you have any other experience, training, qualifications or skills which you feel make you especially suited for work at Dexter Sh

Criminal Convictions

Have you ever been convicted of a crime that has not been annulled by a co Yes No

If yes, please describe for each conviction the nature of the offense involved, date of the offense, the sentence imposed, the court in which you were convicted, the case disposition, and any mitigating circumstances you might wish the Company to know.

Note: A conviction record will not necessarily be a bar to employment. Factors such as your age at the time of the offense, the seriousness and nature of the offense, rehabilitation, and the relation of the offense to employment will be considered.

Employment Experience

List below your last three employers, starting with the most recent. Regardless of your resume, this section must be completed

Name and Address of Employer	Details of Position	Title and Description of Duties
	Date Began:	
	Date Ended:	
	Supervisor Name:	
	Salary upon leaving:	
	Reason for leaving:	
	Date Began:	
	Date Ended:	
	Supervisor Name:	
	Salary upon leaving:	
	Reason for leaving:	
	Date Began:	
	Date Ended:	
	Supervisor Name:	
	Salary upon leaving:	
	Reason for leaving:	

Have you ever been discharged or forced to resign from any prior job? Yes No
 If yes, please explain. _____

References List below three business references, whom you have known at least one year.

Name	Phone Number	Position	Years Acquainted
1.	()		
2.	()		
3.	()		

If you are to be hired by the company, you will be required to attest to your identity and employment eligibility, and to present documents verifying your identity and legal right to work in the United States. You cannot be hired if you cannot comply with these requirements.

Authorization

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered.

I understand that any employment is conditioned on a background and reference check. I authorize the Company to investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character and general reputation to the Company. In addition, I release the Company, its agents, any former employers and all the references listed above from any and all claims, liabilities or demands arising out of or related to such investigation, disclosure or release of information.

I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or the Company. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Company unless in writing.

If I am offered employment I agree to submit to a medical examination and drug test before starting work. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the Company and as permitted by law. I consent to such examination and tests, and I request that the examining doctor disclose to the Company the results of the examination, which results shall remain confidential and separate from my personnel file. I understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug tests, and if I am hired a condition of my employment will be that I abide by the Company's Drug and Alcohol Policy.

I understand that completing this form does not indicate there is a position open and does not obligate the Company to hire. If hired, I agree to abide by all Company work rules, policies and procedures. The Company retains the right to revise its policies or procedures, in whole or in part, at any time.

Signature: _____

Date: _____