



<b>HR DEPARTMENT ONLY</b>
Date Received _____
Position _____

NOTE: SUBMIT COMPLETED APPLICATIONS TO THE ADDRESS LISTED ABOVE. PLEASE ASK IF YOU NEED ASSISTANCE COMPLETING THIS APPLICATION.

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MIDDLE INITIAL \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

HOME/MESSAGE PHONE ( ) \_\_\_\_\_ WORK ( ) \_\_\_\_\_ SOCIAL SECURITY NUMBER \_\_\_\_\_

What position are you applying for? \_\_\_\_\_ Date available for work? \_\_\_\_\_

Shift(s) Available: Days  Evenings  Nights  Would you prefer to work: Full time  Part time  Temporary

Are you legally entitled to work in the United States? Yes  No  Proof of right to work in the U.S. will be required if hired.

Are you 18 years or older? Yes  No  If no, employment is subject to minimum legal age requirements.

Have you been convicted of a felony or released from prison within the past ten years? (You will be required to complete a Criminal Inquiry Application in order to be considered for employment. A conviction may not necessarily disqualify you from employment.) Yes  No

If yes, please indicate the date and nature of the offense \_\_\_\_\_

What are your starting monthly salary expectations? \_\_\_\_\_

Have you ever previously applied to or been employed by this company? If yes, when? \_\_\_\_\_

How did you learn about this opening? \_\_\_\_\_

EDUCATION			GRADUATE		
	Name and Location of School	Years Completed	Yes	No	Degrees Received
High School					
College					
Trade					
Business, or					
Graduate School					

Were you known by any other name at any job or school listed on this application? Yes  No  If yes, what name? \_\_\_\_\_

Indicate school or employer \_\_\_\_\_

Personal Computer and software used: \_\_\_\_\_ Indicate any other skills related to the position you are seeking: \_\_\_\_\_

**EQUAL OPPORTUNITY EMPLOYER**

**bridgeways**, is an Equal Opportunity Employer and does not unlawfully discriminate on the basis of race, sex, color, age, religion, national origin, marital status, sexual orientation, disability or veteran status, or any other basis prohibited by Federal, State or Local Law.

**EMPLOYMENT RECORD (INCOMPLETE APPLICATIONS CANNOT BE ACCEPTED)**

Please start with most recent employer, include military service. If currently employed, may we contact your employer? Yes  No

Employer \_\_\_\_\_ Type of business \_\_\_\_\_ Telephone ( ) \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_ Telephone ( ) \_\_\_\_\_  
Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Reason for leaving \_\_\_\_\_ Wage \_\_\_\_\_  
Duties \_\_\_\_\_

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Employer \_\_\_\_\_ Type of business \_\_\_\_\_ Telephone ( ) \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_ Telephone ( ) \_\_\_\_\_  
Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Reason for leaving \_\_\_\_\_ Wage \_\_\_\_\_  
Duties \_\_\_\_\_

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Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_ Telephone ( ) \_\_\_\_\_  
Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Reason for leaving \_\_\_\_\_ Wage \_\_\_\_\_  
Duties \_\_\_\_\_

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Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_ Telephone ( ) \_\_\_\_\_  
Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Reason for leaving \_\_\_\_\_ Wage \_\_\_\_\_  
Duties \_\_\_\_\_

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**APPLICANT'S STATEMENT**

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize the Company to investigate all statements contained in this application and to request information about me from previous employers and educational institutions. I expressly authorize my previous employers to provide information and opinions concerning my work and work habits. Further, I release all parties (the Company) and persons connected with any requests for information from all claims, liabilities, and damages for whatever reason, arising out of furnishing any information that may be sought in arriving at an employment decision.

Due to the enormous number of applications that **bridgeways** receives, I understand **bridgeways** cannot make any guarantees that my application will be considered for any or all open positions they may have, or that my application will be considered for any specific length of time.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in dismissal. I also understand that I am required to abide by all current and subsequently issued rules and regulations of the Company and that employment is for no definite period and may be terminated, at any time, with or without notice, by either party.

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Signature of Applicant

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Date

## TEAR OFF SHEET

### VOLUNTARY SELF – IDENTIFICATION

**bridgeways** is an equal opportunity employer and does not discriminate on the basis of race, color, religion, sex, age, national origin, disability, veteran status, sexual orientation or any other classification protected by federal, state or local law. The information below will be used only in the compilation of data for affirmative action reporting.

Completion of this data is voluntary and will not affect your opportunity for employment or terms or conditions of employment, if hired. Identification can be declared at any time prior to or, if applicable, after hire. Please return this page with your application.

#### PLEASE COMPLETE IN FULL:

Date: \_\_\_\_\_ Position applied for: \_\_\_\_\_

Name: \_\_\_\_\_

Sex: (Circle appropriate response) Male Female

#### RACE/ETHNICITY:

(Please check one of the descriptions below corresponding to the ethnic group with which you most identify.)

\_\_\_ **Hispanic or Latino** – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

\_\_\_ **White (Not Hispanic or Latino)** – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

\_\_\_ **Black or African American (Not Hispanic or Latino)** – A person having origins in any of the black racial groups of Africa.

\_\_\_ **Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)** – A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

\_\_\_ **Asian (Not Hispanic or Latino)** – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

\_\_\_ **American Indian or Alaska Native (Not Hispanic or Latino)** – A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

\_\_\_ **Two or More Races (Not Hispanic or Latino)** – All persons who identify with more than one of the above five races.

#### Personal and Confidential

**This page contains sensitive information, store in secure "Affirmative Action Forms" files, separately from personnel records!**