

AMERICAN LEGION  
 5021 GARY AVENUE  
 FAIRFIELD, AL 35064  
 205-781-5244

# EMPLOYMENT APPLICATION

An equal opportunity employer.

## PERSONAL

Name \_\_\_\_\_  
(Last) (First) (Middle)

Address \_\_\_\_\_  
(Street) (City) (State) (Zip Code)

Telephone \_\_\_\_\_ Social Security Number \_\_\_\_\_  
(Area Code)

Driver's License Number \_\_\_\_\_ State \_\_\_\_\_ Expiration Date \_\_\_\_\_

Have you ever been convicted of a felony in the last seven years?  Yes  No Explain Felony \_\_\_\_\_

Are you a citizen of the United States?  Yes  No \_\_\_\_\_

## JOB INTERESTS/SKILLS

Position(s) applied for \_\_\_\_\_ Salary Desired \_\_\_\_\_

Have you applied for a position here before?  Yes  No If yes, when? \_\_\_\_\_

Type of employment requested  Full Time  Part Time  Temporary  Summer

Date you could begin working \_\_\_\_\_ Typing Speed (WPM) \_\_\_\_\_

Summarize any other special skills or qualifications  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## EDUCATION

TYPE OF SCHOOL	NAME AND LOCATION	COURSE OF STUDY	# OF YEARS	GRADE AVERAGE	MAXIMUM GRADE	DEGREE, DIPLOMA, CERTIFICATE AND HONORS RECEIVED
HIGH SCHOOL						
COLLEGE OR UNIVERSITY						
OTHER EDUCATION						
OTHER EDUCATION						

**EMPLOYMENT HISTORY (LIST MOST RECENT FIRST)**

1. Name of Employer \_\_\_\_\_  
Address \_\_\_\_\_  
*(Street) (City) (State) (Zip Code)*  
Supervisor and Title \_\_\_\_\_ Your Title \_\_\_\_\_  
Employed From \_\_\_\_\_ To \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Work Performed \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

2. Name of Employer \_\_\_\_\_  
Address \_\_\_\_\_  
*(Street) (City) (State) (Zip Code)*  
Supervisor and Title \_\_\_\_\_ Your Title \_\_\_\_\_  
Employed From \_\_\_\_\_ To \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Work Performed \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

3. Name of Employer \_\_\_\_\_  
Address \_\_\_\_\_  
*(Street) (City) (State) (Zip Code)*  
Supervisor and Title \_\_\_\_\_ Your Title \_\_\_\_\_  
Employed From \_\_\_\_\_ To \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Work Performed \_\_\_\_\_  
Reason for leaving \_\_\_\_\_

**REFERENCES**

<i>Name</i>	<i>Relationship</i>	<i>Home Phone</i>	<i>Daytime Phone</i>

**ACKNOWLEDGEMENT**

I certify that the answers given by me in this application are correct to the best of my knowledge. I understand that any falsification of this application, whether willingly or accidental, is grounds for disqualification of employment consideration, or dismissal from employment if I am hired. I authorize the company to contact any and all of the references I have listed above to obtain previous employment information or any other pertinent information that they may have. Further, I release the above mentioned references from any and all liability for any damages that may result from information collected by this company. Verification of eligibility to work in the United States must be satisfied for an offer to be made.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

American Legion  
5021 Gary Avenue  
Fairfield, AL 35064  
205-781-5244

CRIMINAL HISTORY RELEASE

To Whom It May Concern:

My name is \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_, State \_\_\_\_\_ Zip Code \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_

Driver License # \_\_\_\_\_

I am requesting a criminal history of myself through your Department. This is a prerequisite to my being hired or maintained as a driver of attendant in the employ of American Legion; I authorize the release of this information.

\_\_\_\_\_  
Signed \_\_\_\_\_ Date \_\_\_\_\_

BELOW FOR POLICE USE ONLY

I have completed a criminal history check on the above names person being:

\_\_\_\_\_  
Date of Birth \_\_\_\_\_

And found the following:

\_\_\_\_\_  
Signed \_\_\_\_\_ Date \_\_\_\_\_

Date \_\_\_\_\_ Police Department \_\_\_\_\_

Please return completed form to your instructor.

**U.S. Department of Justice**  
**Immigration and Naturalization Service**

OMB No. 1115-0136

**Employment Eligibility Verification**

Please read instruction carefully before completing this form. The instructions must be available during completion of this form. **ANTI-DISCRIMINATION NOTICE.** It is illegal to discriminate against work eligible individuals. Employers **CANNOT** specify which document(s) they will accept from an employee. The refusal to hire an individual because of a future expiration date may also constitute illegal discrimination.

**Section 1. Employee Information and Verification** To be completed and signed by employee at the time employment begins.

Print Name: Last	First	Middle Initial	Maiden Name
Address (Street Name and Number)		Apt #	Date of Birth (month/day/year)
City	State	Zip Code	Social Security #
I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.		I attest, under penalty of perjury, that I am (check one of the following): <input type="checkbox"/> A citizen or national of the United States <input type="checkbox"/> A Lawful Permanent Resident (Alien # A _____) <input type="checkbox"/> An alien authorized to work until ___/___/___ (Alien # or Admission # _____)	
Employee's Signature			Date (month/day/year)

Preparer and/or Translator Certification. (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

Preparer's/Translator's Signature	Print Name
Address (Street Name and Number, City, State and Zip Code)	
Date (month/day/year)	

**Section 2. Employer Review and Verification.** To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C as listed on the reverse of this form and record the title, number and expiration date, if any, of the document(s).

List A	OR	List B	AND	List C
Document Title: _____	OR	_____	_____	_____
Issuing Authority: _____		_____	_____	_____
Document #: _____		_____	_____	_____
Expiration Date (if any): ___/___/___		___/___/___	___/___/___	___/___/___
Document #: _____				
Expiration Date (if any): ___/___/___				

**CERTIFICATION** – I attest, under the penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year) \_\_\_/\_\_\_/\_\_\_ and that to the best of my knowledge the employee is eligible to work in the United States. (State employment agencies may omit the date the employee began employment).

Signature of Employer or Authorized Representative	Print Name	Title
Business or Organization Name		Date (month/day/year)
Address (Street Name and Number, City, State, Zip Code)		

**Section 3. Updating and Reverification.** To be completed and signed by employer.

A. New Name (if applicable)	B. Date of Rehire (month/day/year) (if applicable)	
C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment eligibility.		
Document Title:	Document #:	Expiration Date (if any): ___/___/___
I attest, under penalty of perjury, that to the best of my knowledge, this employee is eligible to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.		
Signature of Employer or Authorized Representative		Date (month/day/year)

**LISTS OF ACCEPTABLE DOCUMENTS**

**LIST A  
Documents that Establish Both  
Identity and Employment  
Eligibility**

OR

**LIST B  
Documents that Establish Identity**

AND

**LIST C  
Documents that Establish  
Employment Eligibility**

1. U.S. Passport (unexpired or expired)
2. Certificate of U.S. Citizenship (INS Form N-560 or N-561)
3. Certificate of Naturalization (INS Form N-550 or N-570)
4. Unexpired foreign passport, with I-551 stamp or attached INS Form I-94 indicating unexpired employment authorization
5. Alien Registration Receipt Card with photograph (INS Form I-151 or I-551)
6. Unexpired Temporary Resident Card (INS Form I-688)
7. Unexpired Employment Authorization Card (INS Form I-688A)
8. Unexpired Reentry Permit (INS Form I-571)
9. Unexpired Refugee Travel Document (INS Form I-571)
10. Unexpired Employment Authorization Document issued by the INS which contains a photograph (INS Form I-688B)

1. Driver's license or ID card issued by a state or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, sex, height, eye color, and address
2. ID card issued by federal, state, or local government agencies or entities provided it contains a photograph or information such as name, date of birth, sex, height, eye color, and address
3. School ID card with a photograph
4. Voter's registration card
5. U.S. Military card or draft record
6. Military dependent's ID card
7. U.S. Coast Guard Merchant Mariner Card
8. Native American tribal document
9. Driver's license issued by a Canadian government authority

**For persons under age 18 who are unable to present a document listed above:**

10. School record or report card
11. Clinic, doctor or hospital record
12. Day-care or nursery school record

1. U.S. Social Security card issued by the Social Security Administration (other than a card stating it is not valid for employment)
2. Certification of Birth Abroad issued by the Department of State (Form Fs-545 or Form DS-1350)
3. Original or certified copy of a birth certificate issued by a state, county, municipal, authority or outlying possession of the United States bearing an official seal
4. Native American tribal document
5. U.S. Citizen ID Card (INS Form I-197)
6. ID Card for use of Resident Citizen in the United States (INS Form I-179)
7. Unexpired employment authorization document issued by the INS (other than those listed under List A)

Illustrations of many of these documents appear in Part 8 of the Handbook for Employers (M-274)