



APPLICATION FOR EMPLOYMENT

Date Submitted:	
Submitted By:	
Date HR Rcvd:	
Hired?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Personal Information				Date:		Last
Name:	Last	First	Middle			
Permanent Address:	Street	City	State	Zip		
Phone No.:	() -	Are you 18 Years or Older:	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you legally authorized to work in the United States?			<input type="checkbox"/> Yes <input type="checkbox"/> No			
Email:						
Employment						First
Position applying for:						
Date you can start:		Salary Desired:	\$			
Employed Now?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If so may we inquire of your present employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
Ever applied to Cutting Edge before:	<input type="checkbox"/> Yes <input type="checkbox"/> No	When:	Where:			
Referred by:						
How did you learn about us?	<input type="checkbox"/> Advertisement <input type="checkbox"/> Relative <input type="checkbox"/> Employment Agency <input type="checkbox"/> Friend <input type="checkbox"/> Other					
Do any of your friends or relatives work here? Who?						
What schedule can you work?	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time					
Education		Name/Location	No. of years attended	Did you graduate?	Subjects Studied	
High School						
College						
Trade, Business or Technical School						
Describe any specialized training, apprenticeship or trade skills:						
General						
U.S. Military or Naval service:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Rank:				
Present Membership in National Guard or Reserves:	<input type="checkbox"/> Yes <input type="checkbox"/> No					
Activities/Special Training (civic/athletic etc.):						

(Exclude organizations, the name of which indicates the race, creed, sex, age, marital status, color or nation of origin of its members)



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Former Employers (List below last three employers, starting with most recent)				Last
Date Month/Year	Name and Address	Position	Reason for Leaving	
May we contact all of the above employers to verify employment? <input type="checkbox"/> Yes <input type="checkbox"/> No				First
References (Give the names and contact information of three persons not related to you, whom you have known at least one year)				
Name	Address	Business	Years Acquainted	
1.				
2.				
3.				
Can you travel if the job requires it?		<input type="checkbox"/> Yes <input type="checkbox"/> No		Middle
Can you perform the essential functions of the job, for which you are applying, either with or without a reasonable accommodation? Please do not answer unless you have been informed about the requirements of the job for which you are applying: <input type="checkbox"/> Yes <input type="checkbox"/> No				
I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.				
I understand that the company participates in E-Verify, per federal requirements.				
In consideration of my employment, I agree to conform to the company's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the company's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the company. I understand that no company representative, other than its president, and then only in writing and signed by the president, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing.				
Signature of Applicant		Date		
Do not write below this line				
Interviewed by:		Date:		
Remarks:				
Cutting Edge Supply is an equal opportunity employer. Cutting Edge Supply is committed to providing a work environment free of harassment, discrimination, retaliation, and disrespectful and/or other unprofessional conduct based on any of the following Legally Protected Characteristics: race, religion, color, gender (identity, expression, transgender, sexual orientation), national origin, ancestry, physical or mental disability, medical condition, genetic information, marital status, age (over 40), military or veteran status. This includes all aspects of employment, hiring, assignments, training, promotions, compensation, employee benefits, discipline and discharge, and all other terms and conditions of employment.				