



EMPLOYMENT APPLICATION

www.westernsupply.com

APPLICANT INFORMATION

LAST NAME	FIRST NAME	MIDDLE	SSN
MAILING ADDRESS			
PHONE 1	PHONE 2	EMAIL ADDRESS	
Are you 18 or older? Y or N		Are you a U.S. citizen? Y or N	
Military service? Y or N		If yes, which branch?	
Are you a veteran? Y or N		If yes, which war?	
Convicted of a felony? Y or N			
If yes, please explain.			

POSITION AVAILABLE

What position are you applying for?			
How did you learn of the position available?			
EMPLOYMENT TYPE DESIRED	HOURLY RATE DESIRED	SALARY DESIRED	AVAILABLE START DATE
Full Time / Part Time / Temp			

EDUCATION

SCHOOL NAME	LOCATION	YEARS ATTENDED	MAJOR & DEGREE EARNED

OTHER / APPLICABLE TRAINING	
-----------------------------	--

APPLICABLE SKILLS / PROFICIENCIES	
-----------------------------------	--

REFERENCES – Other than previous employer or relatives			
NAME	COMPANY & POSITION	RELATIONSHIP	PHONE

EMPLOYMENT HISTORY			
EMPLOYER NAME	POSITION HELD	START DATE	END DATE
MAILING ADDRESS			
SUPERVISOR NAME	PHONE	EMAIL ADDRESS	
STARTING RATE OF PAY	ENDING RATE OF PAY	MAY WE CONTACT? Y or N	REASON FOR LEAVING
EMPLOYER NAME	POSITION HELD	START DATE	END DATE
MAILING ADDRESS			
SUPERVISOR NAME	PHONE	EMAIL ADDRESS	
STARTING RATE OF PAY	ENDING RATE OF PAY	MAY WE CONTACT? Y or N	REASON FOR LEAVING
EMPLOYER NAME	POSITION HELD	START DATE	END DATE
MAILING ADDRESS			
SUPERVISOR NAME	PHONE	EMAIL ADDRESS	
STARTING RATE OF PAY	ENDING RATE OF PAY	MAY WE CONTACT? Y or N	REASON FOR LEAVING
EMPLOYER NAME	POSITION HELD	START DATE	END DATE
MAILING ADDRESS			
SUPERVISOR NAME	PHONE	EMAIL ADDRESS	
STARTING RATE OF PAY	ENDING RATE OF PAY	MAY WE CONTACT? Y or N	REASON FOR LEAVING

DISCLAIMER / AUTHORIZATION / LEGAL STATEMENT

I authorize investigation on all statements contained in this application. Further, I understand and agree that my employment is for no definite period and may, regardless of the date or payment of my wages and salary, be terminated at any time without cause and without any previous notice.

I understand that any misrepresentation on this application may be reason for immediate dismissal, and that permanent employment depends on satisfactory replies from references, a favorable report on my medical examination where required, drug and alcohol testing, criminal record check, and a successful completion of a probationary period of employment.

SIGNATURE

PRINTED NAME	SIGNATURE	DATE

Mail Completed Application to:

**Human Resources
Western Supply Company
P.O. BOX 1686
Hutchinson, KS 67504-1686**

Or email to jobs@westernsupply.com