



An Equal Opportunity Employer: *AMA Nantucket, Inc. (the "Company") is an equal opportunity employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, national origin, marital status, ancestry, citizenship, sexual orientation or preference, physical or mental disability, genetic predisposition or carrier status, military or veteran status, or any other category protected under applicable federal or state law.*

APPLICATION FOR EMPLOYMENT (Please print all sections)

Position(s) Applied For: _____ Date of Application: _____

Date available to begin work: _____ Type of position applied for: Full Time Part Time Seasonal

Have you been employed by AMA Nantucket in the past? Yes No If yes, list date(s) and position(s)? _____

PERSONAL INFORMATION

Name: _____ Social Security No. _____
Last First Middle

Current Address: _____ () _____
Street City State Zip Code Telephone

Permanent Address: _____ () _____
Street City State Zip Code Telephone

Email Address: _____

Include valid driver's license number, if you are applying for a job for which driving is required. _____

Are you at least eighteen (18) years old? Yes No If you are under eighteen (18) years old, do you have a work permit? Yes No

Are you legally authorized to work in the United States? Yes No

Do you have any relatives employed by AMA Nantucket, Inc.? Yes No If yes, please list name(s) and work area or department: _____

Legal Information: It is unlawful to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability. **NOTE:** *This application is current for six (6) months. If you have not heard from the Company within this time and still wish to be considered for employment, it will be necessary to fill out a new application*

EDUCATION

	Name & Location of School	Major/Subjects	Did You Graduate?	Degree Received
High School	_____	_____	Yes No	_____
College	_____	_____	Yes No	_____
Other	_____	_____	Yes No	_____

SKILLS AND QUALIFICATIONS

Summarize any training, special skills, licenses and/or certificates that may qualify you as being able to perform job related functions in the position for which you are applying:

REFERENCES

Name	Telephone #	Years Known
_____	_____	_____
_____	_____	_____
_____	_____	_____

EMPLOYMENT HISTORY: Please give accurate, complete employment data, including part-time employment. Start with your present or most recent employer. You may include any verified work performed on a volunteer basis, licensing certifications, and/or specialized training. If applicable, include relevant military experience. In addition to answering these questions, please feel free to attach your resume, but not in place of completing the required information.

May the Company contact your present employer? Yes No

Present or Last Employer: _____ Telephone: (____) _____

Address: _____ Supervisor: _____

Specific Duties: _____

Reason for Leaving: _____ Employed from: _____ to _____
Month/Year Month/Year

May the Company contact your previous employers? Yes No

Previous Employer: _____ Telephone: (____) _____

Address: _____ Supervisor: _____

Specific Duties: _____

Reason for Leaving: _____ Employed from: _____ to _____
Month/Year Month/Year

Previous Employer: _____ Telephone: (____) _____

Address: _____ Supervisor: _____

Specific Duties: _____

Reason for Leaving: _____ Employed from: _____ to _____
Month/Year Month/Year

IN CASE OF EMERGENCY NOTIFY: _____
Name Address Telephone #

PLEASE READ CAREFULLY BEFORE SIGNING

I certify that the above information is true, complete, and correct to the best of my knowledge. I represent that I have withheld nothing which, if disclosed, would affect this application unfavorably. I understand that any false statement, misrepresentation or omission made by me on my application, resume, or any other materials I have submitted, or during my interviews, can result in denial of employment, or, if I am already employed when such false statement, misrepresentation or omission is discovered, immediate termination of my employment.

I authorize the Company to inquire into my educational, professional and past employment history references as needed to research my qualifications for this position. I hereby give my consent to any former employer, educational institution, or individual listed as a reference in this application to provide information about me to the Company, and I agree to hold the Company and any such former employer, educational institution, or individual harmless from any claims made by me on the basis of providing such information. I further agree that the Company and any such former employer, educational institution, or individual shall not be held liable in any respect if a job offer is not extended or is withdrawn by the Company, or if my employment is terminated due to information provided in response to this application.

I understand that the Immigration Reform and Control Act of 1986 requires that, if hired, I must furnish appropriate documentation to the Company establishing my identity and employment eligibility. If offered a position by the Company, I agree to provide the Company documents which verify my identity and right to work in the United States within 72 hours of commencing employment as a condition of my employment.

I understand that employment at AMA Nantucket, Inc. is terminable "at will," which means that the employment relationship can be terminated by either me or the Company at any time and for any reason not prohibited by law. I understand that nothing in this employment application, the granting of an interview for employment, any offer of employment, nor any personnel manuals or forms used by the Company create an employment contract between me and the Company. I further understand that no supervisor, manager or representative of the Company other than the President of AMA Nantucket, Inc. has any authority to enter into any agreement for employment for any specified period of time.

In the event of my employment with the Company, I agree to comply with all Company rules and regulations. I further understand that I may be required to sign a confidentiality, business ethics and/or non-competition agreement in connection with any employment with the Company.

I hereby acknowledge that I have read and agree to the above statements.

Signature _____ Date _____

FOR OFFICE USE ONLY

INTERVIEWED BY: _____ **DATE INTERVIEWED:** _____