

**BRUNNER
SANDEN DEITRICK**

FUNERAL HOME & CREMATION CENTER

RECEPTION CENTER | ARRANGEMENT CENTER | GIFT SHOP | MONUMENT STORE | FLOWER SHOP

Application for Employment

(Applicants may be tested for illegal drugs - Any offer is conditional upon the results of any such tests)

Name _____
First Middle Last

Present Address _____
Number Street City State Zip

How long have you lived at the present address? _____ SS# _____

If under 18, please list age _____ Telephone # _____

Email Address _____

Position Applied For _____ Desired Salary _____
(Be Specific) (Be Specific – do not write “Negotiable”)

How many hours can you work weekly? _____ Can you work nights? _____ Weekends? _____

Employment Desired: Full-Time Part-Time Full or Part-Time
(circle one) (25 or more hrs/wk) (25 or less hrs/wk)

When are you available to work? _____

Can you stand for more than 4 hours without sitting? _____

Can you lift a heavy flower arrangement (approx. 50 lbs.)? _____

Have you ever been convicted of a crime? _____

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

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Do you have a driver's license? _____ Is it currently suspended? _____

Is there any reason at all you shouldn't operate a motor vehicle (conditions, medications, etc)? _____

List Medications/Conditions that may affect your ability to perform job duties (use additional sheets if necessary):

Have you had any driving accidents/violations in the past 3 years? _____ How Many? _____

School (Circle One) - High School/College/Bus. or Trade School/Professional School

Name _____ Address _____

Number Yrs. Completed _____ Major/Degree _____

School (Circle One) - High School/College/Bus. or Trade School/Professional School

Name _____ Address _____

Number Yrs. Completed _____ Major/Degree _____

School (Circle One) - High School/College/Bus. or Trade School/Professional School

Name _____ Address _____

Number Yrs. Completed _____ Major/Degree _____

School (Circle One) - High School/College/Bus. or Trade School/Professional School

Name _____ Address _____

Number Yrs. Completed _____ Major/Degree _____

References (list two, other than relatives or previous employers)

Name _____ Phone _____ Email _____

How you know them _____

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An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

Have you ever been in the armed forces? _____

Are you now a member of the National Guard? _____

May we contact employers listed in this application? _____

Are you completing this application yourself? _____

If no, who completed this application? _____

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Work Experience (List all experience within past 5 years – attach additional sheets if necessary)

Name _____	Address _____
City/State/Zip _____	Phone _____
Employment dates _____	
Beginning Salary _____	Ending Salary _____
Last Job Title _____	
Supervisor _____	Phone/Email _____
Reasons for leaving (be specific) _____	
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.	

Name _____	Address _____
City/State/Zip _____	Phone _____
Employment dates _____	
Beginning Salary _____	Ending Salary _____
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Supervisor _____ Phone/Email _____

Reasons for leaving (be specific) _____

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City/State/Zip _____ Phone _____

Employment dates _____

Beginning Salary _____ Ending Salary _____

Last Job Title _____

Supervisor _____ Phone/Email _____

Reasons for leaving (be specific) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

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Application Form Waiver

In exchange for the consideration of my job application by Brunner Funeral Home Inc. (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Brunner Funeral Home Inc., or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President of the Company. Both the undersigned and the Company may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contract.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act. I authorize the Company to obtain and rely upon consumer reports or investigative consumer reports in considering me for employment and, if I am employed, in considering me for subsequent promotion, assignment, reassignment, retention, or discipline. By my signature below, I authorize the Company to obtain any such reports and to share the information received with any person involved in the employment decision about me.

I further understand that my employment with the Company shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of applicant _____ Date: _____

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.