## **APPLICATION FOR EMPLOYMENT**

All applicants are considered for all positions without regard to race, color, creed, religion, sex, national origin, citizenship status, ancestry, age, marital status, veteran status, physical or mental disability, pregnancy, medical condition, sexual orientation, or any other legally protected status. By completing this application, you are seeking to join a team of hardworking professionals dedicated to consistently delivering outstanding service to our customers and contributing to the financial success of the company, its clients, and its employees. Equal access to programs, services and employment is available to all qualified persons. Those applicants requiring accommodation to complete the application and/or interview process should contact a management representative.

(PLEASE PRINT) Position(s) applied for:		Date of application:			
Last Name	First Name		Middle Name		
Address	City	State	Zip Code		
E-mail Address		N	ickname		
Telenhone Number(s)					

## **EMPLOYMENT EXPERIENCE**

Please list the names of your present or previous employers in chronological order with present or last employer listed first. Be sure to account for <u>all</u> periods of time including military service and any period of unemployment. If self-employed, give firm name and supply business references. [Add additional page if necessary]

	Dates Employed					
Name and Address of Employer	From	То	Supervisor and Telephone Number	Job Title and Duties	Reason for Leaving	
	Month/Year	Month/Year				
	Pay	Rate				
	Starting	Final				
			May we contact? ☐ Yes ☐ No			
	Dates Employed					
Name and Address of Employer	From Month/Year	To Month/Year	Supervisor and Telephone Number	Job Title and Duties	Reason for Leaving	
	Pay Rate					
	Starting	Final				
			May we contact? ☐ Yes ☐ No			
			<b>,</b>			
Name and Address of Employer	Dates Employed		Supervisor and Telephone Number	Ioh Title and Duties	Reason for Leaving	
Name and Address of Employer	From Month/Year	To Month/Year	oupervisor and relephone Number	oob Title and Baties	Reason for Leaving	
	Pay Rate Starting Final					
	Julia	IIIWI				
			May we contact? ☐ Yes ☐ No			

If yes, please explain:								
Please explain any gaps in y	our employme	ent history:						
Please list any other experie considered in evaluating you				ages, or other qualific	cation	ns that you believ	ve should be	
Please describe your educat	ional backgrou	·	<b>DUCATIO</b> e provided					
School Name	Years Complete (Circle)	d Diploma		Describe Course of Study or Major		escribe Specializ Experience, Skills Curricular Ac	and Extra-	
High School:	9 10 11 12	2						
College/University:	1 2 3 4							
Graduate/Professional:	1 2 3 4							
Trade or Correspondence:								
Other:								
Please list three professiona				AL REFERENCE	<u>s</u>			
Name & Title			Business Relationship		1	Telephone Number or Email		
CO-WORKER REFERENCES								
Please list three people you	have worked v				nal fri	ends or relatives	s.	
Name	Оссир	oation	(Exam <sub>l</sub>	Relationship  ble: Worked together at AB  Company for 3 years)	С	Years Acquainted	Telephone Number	
			<u> </u>					

Have you ever been involuntarily terminated or asked to resign from any job?..... ☐ Yes ☐ No

## **GENERAL INFORMATION**

1.	Have you ever used another name?	☐ Yes	□No
2.	Is any additional information relative to name changes, use of an assumed name, or nickname necessary to enable a check on your work and educational record?	☐ Yes	☐ No
	If yes to either of the above, please explain:		
3.	Have you ever worked for this company before?	☐ Yes	□No
	If yes, please give dates and position:		
4.	Do you have friends and/or relatives working for this company?	☐ Yes	□No
	If yes, name(s) and relationship(s):		
5.	On what date are you available to begin work?		
6.	Days/Hours available to work:		
7.	Are you available to work?	Tem	nporary
8.	Minimum salary required?Per Hour \$Per Month \$		
9.	If hired, would you have a reliable means of transportation to and from work?	☐ Yes	□No
10.	Can you travel if the position requires it?	☐ Yes	□No
11.	Can you relocate if the position requires it?	☐ Yes	□No
12.	Are you at least 18 years old?	☐ Yes	□No
13.	If hired, can you present evidence of your identity and legal right to live and work in this country?	☐ Yes	□No
14.	Are you able to perform the essential job functions of the job for which you are applying with or without reasonable accommodation?	☐ Yes	□No
	Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for qualified applicants/employees to perform essential job functions.		
15.	Have you ever pled guilty or "no contest" to, or been convicted of, a misdemeanor or felony?	☐ Yes	☐ No
	If yes, please give the date(s) and details:		
16.	Have you been arrested for any matters for which you are out on bail or on your own recognizance pending trial?	☐ Yes	□No
	If yes, please give the date(s) and details:		

Note: Answering "Yes" to questions 15 or 16 does not constitute an automatic bar to employment. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account. Do not include minor traffic infractions, any convictions for which the record has been sealed or expunged, any conviction for which the conviction has been judicially dismissed, referrals to and participation in any pretrial or post trial diversion programs, and misdemeanor marijuana-related offenses that occurred over two years ago in answering these questions.

This application for employment shall be considered active for a period of time not to exceed **45** days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

## APPLICANT STATEMENT AND AGREEMENT

Please read and initial each paragraph below. If there is anything that you do not u	ınderstand, please ask.
I hereby authorize the Company to thoroughly investigate my references, w suitability for employment and, further, authorize the prior employers and reference letters, reports and other information related to my work records, without giving marelease the Company, my former employers and all other persons, corporations, p demands or liabilities arising out of or in any way related to such investigation or dis	es I have listed to disclose to the Company any and a e prior notice of such disclosure. In addition, I hereby partnerships and associations from any and all claims
In the event of my employment with the Company, I understand that I am recompany. I understand that the Company reserves the right to require me to substant system prior to employment and at any time during my employment, to the externation alcohol screening and understand that the presence of drugs or alcoholiseration of employment with this company, or may result in termination of my	mit to a test for the presence of drugs or alcohol in my ont permitted by law. I voluntarily submit to the drug shol in my system may disqualify me from furthe
I understand that any offer of employment may be contingent upon the production of the results of the physical examination and related tests to the Component or take any of the above tests, my application for employment may be rejective. If it is, I will be so advised either before or after hiring and a bond application of the production of the product	npany. I understand that should I decline to sign this cted. I understand that bonding may be a condition o
I understand that I may be required to take other tests such as personality a I understand that should I decline to sign this consent or take any of the above test my employment may be terminated.	
If hired, I understand and agree that my employment with the Compan committed to continuing the employment relationship for any specific term. I furthe employment relationship at any time, with or without cause, and with or without employment cannot be amended, modified, or altered in any way by oral statem written amendment signed by the Owner/President of this Company.	r understand that the Company or I may terminate the ut notice. I understand that the at-will status of my
I understand that safety of employees is extremely important to the Compassafe working environment. I understand that I, and every employee, have a responsall safety procedures and guidelines and following the directions of my site supervistate, and local regulations related to on-the-job safety and health. I also recognormal working hours. Safety should be promoted within the family and in off-the safety practices while performing my job. A copy of the Injury and Illness Prevention	nsibility to prevent accidents and injuries by observing visor. I understand and agree to comply with federal nize that an effective safety program extends beyond e-job activities. I understand and agree to adhere to
I understand that any offer of employment is contingent upon agreement to a copy of which is provided on page 8 of this packet for my review.	and signing of the Company's Arbitration Agreement
I hereby certify that I have not knowingly withheld any information that might that the answers given by me are true and correct to the best of my knowledge. I fu personally completed this application. I understand that any omission or misstatem document used to secure employment shall be grounds for rejection of this applicat regardless of the time elapsed before discovery.	orther certify that I, the undersigned applicant, have ent of material fact on this application or on any
I understand that if I am selected for hire, it will be necessary for me to provi- authority to work in the United States, and that federal immigration laws require me	
I understand that if any term, provision, or portion of this Agreement is decla remainder of this Agreement shall be enforceable.	red void or unenforceable, it shall be severed and the
MY SIGNATURE BELOW ATTESTS TO THE FACT THAT I HAVE LEGALLY BOUND TO ALL OF THE ABOVE TERMS.	READ, UNDERSTAND, AND AGREE TO BE
Signature:	Date:
Printed Name:	
City/State:	