



**APPLICANT'S STATEMENT**

I understand that the Company is committed to providing equal opportunity in all employment practices, including but not limited to selection, hiring, promotion, transfer, and compensation to all qualified applicants and employees without regard to age, race, color, national origin, sex, religion, disability, or any other category protected by federal, state, or local law.

I authorize former and present employers, work and personal references listed in the application, and any other individuals, any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release such parties from all liability for any damages that may result from furnishing same to the Company. I also authorize the Company to provide truthful information concerning my employment with it to future employers and I agree to hold it harmless for providing such information.

I understand that the Company reserves the right, to the extent permitted by law, to require drug or alcohol screening tests of an applicant or an employee either prior to employment or any time during employment and I hereby give my consent to any such tests. I consent to the release of the results of any such tests to the Company or its designee. I release the Company and its designee from any and all liability and damages which may result or arise from any drug test or the provision of information in connection with such a test.

I understand that this employment application and any other Company documents are not promises of employment. Should I be employed, I understand that my employment will be on a trial period for ninety days from the date of my hiring, and that I will remain an at-will employee thereafter. I further understand that, if I am employed, I can terminate my employment at any time with or without cause and with or without advance notice, and that the Company has a similar right. I understand that no manager, representative, or agent of the Company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, except that the Company President may do so in writing.

I understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form.

The information given by me on this application and during the interview process is true and complete in all respects, and I agree that if the information is found to be false, misleading or unsatisfactory in any respect (in the Company's judgment) that I will be disqualified from consideration for employment or subject to immediate dismissal if discovered after I am hired.

I authorize the Company to conduct electronic inquiry related to my background, including review of all social networking sites and to make adverse decisions as a result of such inquiries. I further understand that the term "investigative consumer report" means a report in which information on my character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with my neighbors, friends, or associates, or with others with whom I am acquainted or who may have knowledge concerning any such items of information.

**I CERTIFY THAT I HAVE RECEIVED A SEPARATE WRITTEN NOTIFICATION THAT THE COMPANY MAY OBTAIN A CONSUMER REPORT ON ME FOR USE IN CONNECTION WITH MY APPLICATION AND, IF I AM HIRED, MY EMPLOYMENT WITH THE COMPANY. I AUTHORIZE THE COMPANY TO OBTAIN THIS REPORT.**

**THIS APPLICATION WILL BE CONSIDERED "ACTIVE" FOR A MAXIMUM OF THIRTY (30) DAYS. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY.**

**DO NOT SIGN UNTIL YOU READ AND UNDERSTAND THIS STATEMENT.**

**Signature**

**Date**

*You agree your electronic signature is the legal equivalent of your manual signature on this Application.*

**Printed Name**



Each inquiry on this application must be **fully** answered or **completed**. Otherwise, you will not be considered for employment.

PERSONAL DATA		
Last Name	First Name	Middle Name
Present: _____	_____	Years _____ Months _____
Street Address _____	City, State, Zip _____	How long have you lived there?
Previous: _____	_____	Years _____ Months _____
Street Address _____	City, State, Zip _____	How long have you lived there?
Telephone Number(s) _____	Email _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary	Are you 18 years of age or older?
Position Desired _____	Placement Desired _____	When are you available for work? _____
Career Objectives: _____		
Position Applying For: _____		

PREVIOUS EMPLOYMENT		
<i>Please list the names of your present or previous employers in chronological order with present or last employer listed first. Include part-time and seasonal employment. If self-employed, give firm name and supply business reference. DO NOT ANSWER "See Resume." Fill out this form completely.</i>		
Employer _____	Dates Employed From _____ To _____	
Job Title _____	Hourly Rate/Salary Starting _____ Final _____	
Telephone Number(s) _____	Address _____	
Supervisor Name, Title _____	Street _____	City, State, Zip _____
Work Performed _____	Reason for Leaving _____	
Employer _____	Dates Employed From _____ To _____	
Job Title _____	Hourly Rate/Salary Starting _____ Final _____	
Telephone Number(s) _____	Address _____	
Supervisor Name, Title _____	Street _____	City, State, Zip _____
Work Performed _____	Reason for Leaving _____	
Employer _____	Dates Employed From _____ To _____	
Job Title _____	Hourly Rate/Salary Starting _____ Final _____	
Telephone Number(s) _____	Address _____	
Supervisor Name, Title _____	Street _____	City, State, Zip _____
Work Performed _____	Reason for Leaving _____	

RELEVANT EXPERIENCE		
<i>Please indicate positions you have held in prior jobs below.</i>		
<b>Management/Supervision</b>	<b>Office/Administration</b>	<b>Medical Office</b>
<input type="checkbox"/> General Manager	<input type="checkbox"/> Customer Service Representative	<input type="checkbox"/> Receptionist
<input type="checkbox"/> Operations Manager	<input type="checkbox"/> Accounting: Payables/Receivables	<input type="checkbox"/> Front Office
<input type="checkbox"/> Sales Manager	<input type="checkbox"/> File Clerk <input type="checkbox"/> General Clerical	<input type="checkbox"/> Back Office
<input type="checkbox"/> Office Manager	<input type="checkbox"/> Cashier <input type="checkbox"/> Secretary wpm: _____	<input type="checkbox"/> Other: _____
Professional designations, certifications, licenses, or courses that may be applicable to the position for which you are applying: _____		



**BACKGROUND INFORMATION**

*Please explain fully any gaps in your employment history. Be sure to account for all periods of time including military service and any period of unemployment.*

List any other names which you may have used and which will be necessary to verify your prior employment \_\_\_\_\_

If hired, can you provide proof that you are legally entitled to work in the U.S.?  Yes  No

If not, what steps must be taken for you to begin employment lawfully? \_\_\_\_\_

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

If yes, please explain circumstances. \_\_\_\_\_

May be contact your current employer  Yes  No

If no, please explain: \_\_\_\_\_

Have you ever worked for this Company?  Yes  No

If yes, please give dates and position: \_\_\_\_\_

Do you have any friends or relatives working here or for one of our other companies?  Yes  No

If yes, name(s), relationship and company: \_\_\_\_\_

How were you referred to us? \_\_\_\_\_

Have you ever plead no contest, nolo contendere, or been convicted of a crime?  Yes  No

Are any charges currently pending against you?  Yes  No      Has any adjudication ever been withheld?  Yes  No

(NOTE: Answering "yes" to these questions does not constitute an automatic bar to employment). If you answered yes to any of the preceding questions, please give dates and details: \_\_\_\_\_

Amount of overnight travel acceptable to you. \_\_\_\_\_

Do you have any commitments to any other employer which may affect your employment?  Yes  No

If yes, explain: \_\_\_\_\_

**EDUCATION**

School Name	Years Completed (circle one)					Diploma/Degree	Describe Course of Study or Major	Describe Specialized Experience, Training, Skills, and Extra Curricular Activities
	4	5	6	7	8			
Elementary								
High School								
College/University								
Graduate/Professional								
Trade/Correspondence								

**PERSONAL REFERENCES**

*Please provide three personal references. DO NOT USE past employers and/or relatives.*

NAME	ADDRESS (City, State)	TELEPHONE NUMBER(S)	OCCUPATION

**OTHER INFORMATION**

*Please describe any other experience that you have which would be relevant to the job for which you are applying:*