APPLICATION FOR EMPLOYMENT

All applicants are considered for all positions without regard to race, religion, color, sex, gender, sexual orientation, pregnancy, age, national origin, ancestry, physical/mental disability, medical condition, military/veteran status, genetic information, marital status, ethnicity, citizenship or immigration status or any other protected classification, in accordance with applicable federal, state, and local laws. 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 organization, 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.

Date of Application

Position(s) Applied for

Print Name (Last, First, & Mido	dle)					
Street Address		City	State	Zip Code		
Main Phone Number	Phone Number Alternate Phone Number		Email			
EMPLOYMENT EXPERIENCE Please list the names of your pr listed first. Be sure to account for additional page if necessary.						
Name of Employer		Supervisor	May we	May we contact?		
			☐ Yes ☐	☐ Yes ☐ No		
Street Address						
Phone Number		Dates Employed (Month/Year)				
		From	То			
Job Title and Duties		Reason for Leaving				
Name of Employer		Supervisor	May we	e contact?		
			☐ Yes ☐	□No		
Street Address						
Phone Number		Dates Employed (Month/Y	ear)			
		From	То			
	<u>, </u>		•			

Job Title and Duties	Reason for Leaving	
L	<u> </u>	
Name of Employer	Supervisor	May we contact?
		☐ Yes ☐ No
Street Address		
- Street Address		
Phone Number	Dates Employed (Month/Yea	rl
Priorie Number		
	From	То
Job Title and Duties	Reason for Leaving	
Have you ever been involuntarily terminated or asked to res	ign from any job?	□ Yes □ No
Trave you ever been involuntarily terminated or abreate to res	.g.,	
If yes, please explain		
Please explain any gaps in your employment history:		

				s, or other	qualifications t	hat you believe should
	in evaluating your qua			9,000		
EDUCATION Please describe	e your educational bad	ckground in the tab	le provided be	low.		
	School Name	Years Completed	Diploma/ Degree (Yes/No)		f Study/Major	Specialized Training, Skills, or Extra- Curricular Activities
High School						
College/ University						
Graduate/ Professional School						
Trade School						
Other						
	ROFESSIONAL REFERENCE:		yho are not rel	ated to you		
Please list three professional references Name and Title		Relationship			Phone Number or Email	
Personal Refer Please list thre	RENCES e people who know yo	ou well.				
Name and Tit	· · · ·		ınd Years Acqu	ainted	Phone Numb	per or Email

GENERA	L INFORMATION						
1.	L. Have you ever used another name? ☐ Yes ☐ No						
2.	Is any additio	nal information	relative to nam	e changes, use	of an assumed i	name, or nickna	me necessary to
	enable a chec	k on your work	and educationa	ıl record?			□ Yes □ No
	a. If yes	to either of the	above, please	explain:			
3.	Have you eve	r worked for thi	s company befo	ore?			□ Yes □ No
	a. If yes	, please give dat	es and position	i:			
4.	Do you have f	friends and/or re	elatives working	g for this compa	ıny?		□ Yes □ No
	a. If yes, name(s) and relationship(s):						
5.							
6.	6. Days/Hours available to work:						
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7.	'. Are you available to work? ☐ Full-time ☐ Part-time ☐ Shift Work ☐ Temporary						
8.	8. If hired, would you have a reliable means of transportation to and from work? \square Yes \square No						
9.	9. Can you travel if the position requires it?□ Yes □ No						
10	10. Can you relocate if the position requires it? ☐ Yes ☐ No						
11.	11. Are you at least 18 years old? Yes □ No						
	a. Note:	If under 18, hir	e is subject to v	erification that	you are of mini	mum legal age.	
12	. If hired, can y	ou present evid	ence of your ide	entity and legal	right to work in	this country?	□ Yes □ No
13	Are you able t	to perform the ϵ	essential job fur	nctions of the jo	b for which you	are applying w	ith or without
	reasonable ac	ccommodation?					□ Yes □ No
	a. Note:	: We comply wit	h the ADA and	consider reason	able accommod	dation measure	s that may be

necessary for qualified applicants/employees to perform essential job functions.

Name (print):	Date:
Signature:	
MY SIGNATURE BELOW ATTESTS TO THE FACT THAT I HA ABOVE TERMS.	VE READ, UNDERSTAND, AND AGREE TO ALL OF THE
I understand that if any term, provision, or portion of this severed and the remainder of this Agreement shall be enforcea	s Agreement is declared void or unenforceable, it shall be ble.
I understand that if I am selected for hire, it will be necessand legal authority to work in the United States, and that federathis regard.	
I hereby certify that the answers given by me are true a that I, the undersigned applicant, have personally complete misstatement of material fact on this application or on any dorejection of this application or for immediate discharge if I am en	ed this application. I understand that any omission or cument used to secure employment shall be grounds for
I understand that safety of employees is extremely import to ensuring a safe working environment. I understand that I accidents and injuries by observing all safety procedures and guil I understand and agree to comply with federal, state, and local	and every employee, have a responsibility to prevent delines and following the directions of my site supervisor.
If hired, I understand and agree that my employment Company is required to continue the employment relationsh Company or I may terminate the employment relationship at an I understand that the at-will status of my employment cannot modifications.	ip for any specific term. I further understand that the y time, with or without cause, and with or without notice.
In the event of my employment with the Company, I un regulations of the Company.	derstand that I am required to comply with all rules and
I hereby authorize the Company to thoroughly investigated related to my suitability for employment and, further, authorized disclose to the Company any and all letters, reports and other in prior notice of such disclosure. In addition, I hereby release the corporations, partnerships and associations from any and all corporated to such investigation or disclosure.	rize the prior employers and references I have listed to information related to my work records, without giving me e Company, my former employers and all other persons,
Please read and initial each paragraph below. If there is anythin	ng that you do not understand, please ask.

Legal Disclaimer: This document is intended for informational purposes only, and does not constitute legal information or advice. This information and all HR Support Center materials are provided in consultation with federal and state statutes and do not encompass other regulations that may exist, such as local ordinances. Transmission of documents or information through the HR Support Center does not create an attorney-client relationship. If you are seeking legal advice, you are encouraged to consult an attorney.