APPLICATION FOR EMPLOYMENT

Position Desired:	[]Part time []Full time	e Date	
Name (Print) Last	First	Middle	
Present Address	How long have you lived there?		
Street and Number City State		Years	Months
Previous Address	How long did you live there?		
Street and Number City State		Years	Months
Telephone No	Social Security No		
Have you ever worked for this Company before? [] Yelf Yes, please give dates and position:	es []No		
Have you been convicted of any misdemeanor or felony If Yes, please give the date(s) and details:	in the last seven years? []Yes []No	
NOTE: Answering "Yes" to these questions does not co age and time of the offense, seriousness and account. (Do not include minor traffic citation expunged.)	nature of the violation, and	rehabilitation will	be taken into

RECORD OF PREVIOUS EMPLOYMENT

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 all 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]

business references. [Add additional page if necessary]				
Present or Last Employer Address City, State, Zip Code Telephone	Employed From (mo/yr)	Pay Start \$ Final	Your Title or Position Name and Title of Last Supervisor	Reason for Leaving
Previous Employer Address City, State, Zip Code Telephone	Employed From (mo/yr) To (mo/yr)	Pay Start \$ Final	Your Title or Position Name and Title of Last Supervisor	Reason for Leaving
Previous Employer Address City, State, Zip Code Telephone	Employed From (mo/yr) To (mo/yr)	Pay Start \$ Final	Your Title or Position Name and Title of Last Supervisor	Reason for Leaving
Previous Employer Address City, State, Zip Code Telephone	Employed From (molyr) To (molyr)	Pay Start \$ Final	Your Title or Position Name and Title of Last Supervisor	Reason for Leaving

Previous Employer Address	Employed From (mo/yr)	Pay Start \$	Your Title or Position	Reason for Leaving
City, State, Zip Code Telephone	To (mo/yr)	Final \$	Name and Title of Last Supervisor	
Have you ever been terminated or	asked to resign	n from any jol	o? []Yes[]No If Yes plo	ease explain circumstances:
Please explain fully any gaps in yo			- '	
May we contact your current emplo	oyer? []Yes[] No. If No, p	olease explain:	
Please indicate any actual experie position for which you are applying	ence, special tra	aining and qu	ralifications that you have	which you feel are relevant to the
Have you ever used another nam assumed name, or nickname nece	ne? [] Yes [ssary to enable] No Is any a check on y	additional information relat our work and educational r	ive to change of name, use of an record? If yes, please explain:
If hired, can you furnish proof that y	ou are over 18	years of age	?[]Yes[]No	
Are you capable of satisfactorily pe [] Yes [] No	rforming the es	ssential job du	rties required of the position	n for which you are applying?
Do you have adequate transportation	on to and from	work? []Ye	s []No	

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How many days of work have	e you missed in th	e last three years d	ue to reasons other	than paid holida	s and vacation
YEAR	NUMBE	ER OF DAYS	_		
YEAR	NÜMRE	ER OF DAYS	_		
YEAR	NUMBE	R OF DAYS			
DUCATION		4			
School Name	Years Completed (Circle)	Diploma/Degree	Describe Course of Study or Major	Training, I Skills and Ex	Specialized Experience, tra-Curricular vities
Elementary:	4 5 6 7 8				
High School:	9 10 11 12				
College/University:	1 2 3 4		,		
Graduate/Professional:	1 2 3 4				
Trade or Correspondence:					
Other:					
RSONAL REFERENCES ease list persons who know you	well – not previous	s employers or relatives	5.		*
Vame	Occupation	Address (Street, City and State)		Telephone Number	Number of Years Known

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.

Signature of Applicant

I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE AND ACCURATE.

Date

APPLICANT'S STATEMENT & AGREEMENT

In the event of my employment to a position in this Company, I will comply with all rules and regulations of this Company. I understand that the Company reserves the right to require me to submit to a test for the presence of drugs in my system prior to employment and at any time during my employment, to the extent permitted by law. I also understand that any offer of employment may be contingent upon the passing of a physical examination. I consent to the disclosure of the results of any physical examination and related tests to the Company. I also understand that I may be required to take other tests such as personality and honesty tests, prior to employment and during my employment. I understand that should I decline to sign this consent or decline to take any of the above tests, my application for employment may be rejected or my employment may be terminated. I understand that bonding may be a condition of hire. If it is, I will be so advised either before or after hiring and a bond application will have to be completed.

I understand that the company may investigate my driving record and my criminal record and that an investigative consumer report may be prepared whereby information is obtained through personal interviews with my neighbors, friends, personal references, and others with whom I am acquainted. This inquiry includes information as to my character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written inquiry within a reasonable period of time to receive additional detailed information about the nature and scope of this investigation. I further understand that the Company may contact my previous employers and I authorize those employers to disclose to the Company all records and information pertinent to my employment with them. In addition to authorizing the release of any information regarding my employment, I hereby fully waive any rights or claims I have or may have against my former employers, their agents, employees and representatives, as well as other individuals who release information to the Company, and release them from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to me. I authorize the persons named herein as personal references to provide the Company with any pertinent information they may have regarding myself.

I hereby state that all the information that I provided on this application or any other documents filled out in connection with my employment, and in any interview is true and correct. I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand that if I am employed and any such information is later found to be false or incomplete in any respect, I may be dismissed.

f hired, I agree as follows: My employment and compensation is terminable at-will, is for no definite period, and my employment and compensation may be terminated by the Company (employer) at any time and for any reason whatsoever, with or without good cause at he option of either the Company or myself. No implied, oral, or written agreements contrary to the express language of this agreement re valid unless they are in writing and signed by the President of the Company (or majority owner or owners if Company is not a corporation). No supervisor or representative of the Company, other than the President of the Company (or majority owner or owners if Company is not a corporation), has any authority to make any agreements contrary to the foregoing. This agreement is the entire igreement between the Company and the employee regarding the rights of the Company or employee to terminate employment with or vithout good cause, and this agreement takes the place of all prior and contemporaneous agreements, representations, and inderstandings of the employee and the Company.

you have any questions regarding this statement, please ask a Company representative before signing. I hereby acknowledge that I have read be above statements and understand the same.

SIGNATURE OF APPLICANT DATE

O NOT SIGN UNTIL YOU HAVE READ THE ABOVE STATEMENT & AGREEMENT