

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.

Position(s) applied for		Date of application			
Print full name					
Street address		City	State	ZIP	
Main phone number	Alternate phone number	Email			
Employment Experience Please list the names of your precent employer listed first. Be and supply business references	oresent or previous employer e sure to account for all peri	ods of time. If self-emp			
Name of employer		Supervisor	May we	May we contact?	
			□ 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 contact?
		☐ 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 contact?
name of employer	Supervisor	☐ Yes ☐ No
Church Adduses		
Street Address		
Phone Number	Dates employed (month)	'year)
	From	То
Job title and duties	Reason for leaving	

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Have you ever been involuntarily terminated or asked to resign from any job? $\square$ Yes $\square$ No
If yes, please explain.
Please explain any gaps in your employment history.
Please list any other experience, job-related skills, additional languages, or other qualifications that you believe should be considered in evaluating your qualifications for employment.

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#### Education

Please describe your educational background in the table provided below.

	School name	Diploma/ degree (Yes/No)	Area of study/major	Specialized training, skills, or extracurricular activities
High school				
College/ university				
Graduate/ professional school				
Trade school				
Other				

#### **Business and Professional References**

Please list three professional references of individuals who are not related to you.

Name and title	Relationship	Phone number or email

#### **Personal References**

Please list three people who know you well.

Name and title	Relationship and years acquainted	Phone number or email

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#### **General Information**

	Have you ever used another name? $\square$ Yes $\square$ No 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? $\square$ Yes $\square$ No						
	If yes to eit	ther of the abo	ove, please ex	plain:			
3.	Have vou e	ver worked fo	r this company	v before? □ Y	es □ No		
	•	se provide dat					
4.	-			orking for this	company? $\square$	Yes □ No	
	If yes, nam	e(s) and relati	onship(s):				
5.	On what da	ate are you ava	ailable to begi	n work?			
		available to v	_				
M	onday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7.	Are you ava	ailable to work	«? □ Full-time	e □ Part-tim	ne □ Shift Wo	ork □ Tempor	ary
	•				tation to and f	•	-
9.	Can you tra	avel if the posi	tion requires i	t? □ Yes □ I	No		
10.	. Can you re	locate if the p	osition require	es it? 🗆 Yes 🛭	□ No		
11.	. Are you at	least 18 years	old? □ Yes [	□ No			
	Note: If un	der 18, hire is	subject to ver	rification that	you are of min	imum legal age	e.
12.	. If hired, yo	u will need pr	esent evidence	e of your ident	ity and legal ri	ght to work in	this country.
13.	without rea	asonable accor comply with th	nmodation? e Americans w	□ Yes □ No ⁄ith Disabilities	-	der reasonable	pplying with or e accommodation ssential job

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### **Applicant Statement and Agreement**

Please read and initial each paragraph below. If there is anything that you do not understand, please ask.
I hereby authorize the company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the prior employers and references I have listed to disclose to the company any and all letters, reports, and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers, and all other persons, corporations, partnerships, and associations from any claims, demands, or liabilities arising from or related to such investigation or disclosure.
In the event of my employment with the company, I understand that I must comply with all rules and regulations of the company.
If hired, I understand and agree that my employment with the company is at will and that neither I nor the company is required to continue the employment relationship for any specific term. I further understand that the company or I may terminate the employment relationship at any time, with or without cause, and with or without notice. I understand that my employment's at-will status cannot be amended, modified, or altered by any oral modifications.
I understand that the safety of employees is extremely important to the company and that the company is committed to ensuring a safe working environment. I understand that I, and every employee, are responsible for preventing accidents and injuries by observing all safety procedures and guidelines and following my site supervisor's directions. I understand and agree to comply with federal, state, and local regulations related to on-the-job safety and health.
I hereby certify that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.
I understand that if I am selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration law requires me to complete an I-9 Form in this regard.
I understand that if any term, provision, or portion of this Agreement is declared void or unenforceable, it shall be severed, and the remainder of this Agreement shall be enforceable.
My signature attests that I have read, understand, and agree to the above terms.
Signature:
Name (print):
Date:

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