

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 an 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 Alt. phone number		Email		

#### **Employment Experience**

List the names of your present or previous employers in chronological order with present or most recent employer listed first. Be sure to account for all periods of time. If self-employed, give company name and supply business references. Add an additional page if necessary.

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?	
		☐ 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 or employer	Supervisor	☐ Yes ☐ No	
Street address		□ res □ No	
Street address			
Dhana ann ban	D-1	41-1	
Phone number	Dates employed (month/year)		
	From	То	
Job title and duties	Reason for leaving		
Have you ever been involuntarily terminated or	asked to resign from ar	ny iob? □ Yes □ No	
	action to rootgit troit at	., , ,	
If yes, explain.			



Explain any gaps in your employment history.
List any other experience, job-related skills, additional languages, or other qualifications that
you believe should be considered.

#### **Education**

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**

List three professional references of individuals who are *not* related to you.

Name and title	Relationship	Phone number or email			
Personal References List three people who know you w	vell.				
Name and title	Relationship and years acquainted	Phone number or email			
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? $\square$ Yes $\square$ No				
If yes to either of the above, exp	ain:				
3. Have you ever worked for this lf yes, provide dates and position	• •				
4. Do you have friends and/or relationsh	latives working for this comparip(s):	y? □ Yes □ No			



5.	On what d	late are you a	vailable to beg	gin work?			
6.	6. Days/hours available to work:						
M	onday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7.	Are you a	vailable to wo	rk? □ Full time	e □ Part time	e □ Shift wo	ork 🗆 Tempo	rary
8.	If hired, d	lo you have a ı	reliable means	of transporta	tion to and fr	om work? 🗆 Y	es □ No
9.	Can you tr	ravel if the po	sition requires	it? □ Yes □ N	10		
10.	. Can you re	elocate if the	position requi	es it? □ Yes □	□ No		
11.	-	_	s old? □ Yes □ is subject to ve		t you are of n	ninimum legal	age.
12.	If hired, c □ Yes □ N		t evidence of	your identity a	and legal right	t to work in th	nis country?
13.	•	•	the essential ble accommod	-	-	which you ar	e applying
aco	commodati		Americans with hat may be ne ions.				
Αŗ	plicant	Statement	and Agree	ment			
Rea	ad and initia	al each paragra	aph below. Ask	if there is any	thing that you	do not unders	tand.
	educat author and all me pri employ and all	cion and other rize the prior elletters, repor or notice of su	e company to to matters related mployers and rets, and other in the disclosure. In the persons, conds, or liabilities osure.	d to my suitabi eferences I hav nformation rela n addition, I ho orporations, pa	lity for employ we listed to dis ated to my won ereby release artnerships, an	yment and, fur iclose to the co rk records, wit the company, d associations	ther, ompany any hout giving my former from any



Date	······································
Name	(print):
Signati	ure:
My sigi terms.	nature attests to the fact that I have read, understand, and agree to all of the above
	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.
	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 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 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, have a responsibility to prevent accidents and injuries by observing all safety procedures and guidelines and following the directions of my site supervisor. I understand and agree to comply with federal, state, and local regulations related to onthe-job safety and health.
	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 the at-will status of my employment cannot be amended, modified, or altered in any way by any oral modifications.
	In the event of my employment with the company, I understand that I am required to comply with all rules and regulations of the company.