

EMPLOYMENT APPLICATION PLEASE DO NOT WRITE IN SHADED AREAS – FOR OFFICE USE ONLY

PLEASE PRINT						
First Name	M.I.	Last				
Apartment #	Street Address		Preferred Name / Nickname			
City	State	Zip Code	Today's Date			
() Home Phone	Alternate/Work Phone	E-Mail Address	Emergency N	Jumber Contact		
PLEASE PLACE A CH	ECK BY YOUR RESPONSE	OR PROVIDE THE APPR	OPRIATE INFORMATION			
Are you interested in:	Temporary / Cor	nsulting Work	Permanent Placement	Part-time		
How did you hear about u	classified Ad	Friend (Name)	Radio Internet			
Hourly Pay (minimum if a	applicable)	Annual Pay (desired)				
	icted of a felony, convicted of comatically bar you from emplo			onvicted in a military court martial?		
If yes, Please ex	xplain					
Is it legal for you to work	in this country? Yes	No When	are you able to start work? (Da	te)		
What hours do you prefer	to work?					
Full-Time (norm	nal business hours) Pa	rt-Time Full-Time (2 nd	shift) Full-Time (3 rd shift	c) Weekend (Days)		
In what local area do you	prefer to work?					
·				allowed.) Yes No		
	s not accessible by public transp	-	_	······································		
	if you are looking for a pe		Complete items that are a	pplicable.		
Position Desired:		If presently employed, next salary review date:	What is the name of your current employer?			
Would you consider a pos Yes No	sition involving relocation, ever —	n at your own expense?	//			
If yes, list location prefere	ences:		Date of Last Increase:	What % Will You Travel?		
1	3		/	None		
2	4	Amount of Last Increase: To 25 % Over 50%				



INTV:	TS:

Division	Interviewer	Results		
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		/ / /		
		/ / /		

An Equal Opportunity Employer

Please complete and attach resume

IN ADDITION TO ATTACHING YOUR RESUME, please list your work experience below (last job first)

1.		COMPANY NAME AND LOCATION 1. WHAT DOES THE COMPANDO?			POSITION OR DUTIES	1. SALARY / PAY RATE		DATES (MM/YY)	REASON FOR LEAVING	COMPANY PHONE NUMBER	
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CERTIFICATE OF CANDIDATE (To Be Completed By All Candidates)

General: I have submitted the attached form to the company for the purpose of obtaining assistance in securing permanent, temporary, or contract employment. I understand that I will never be charged a fee by the company. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the company to further process my application. I certify as to the accuracy of the matters set forth herein and in my resume and understand that any misstatement of fact may cause me to be refused employment or to lose my employment.

References: I hereby authorize the company and its agents to make such investigations and inquires into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquires connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications.

Temporary/Contract Employment: If employed as a temporary or contract employee, I understand that I may be an employee of the company and not of any client. If employed, I further understand that my employment is not guaranteed for any specific time and may be terminated at any time for any reason. I further understand that a contract will exist between the company and each client to whom I may be assigned which will require the client to pay a fee to the company in the event that I accept direct employment with the client, I agree to notify the company immediately should I be offered direct employment by a client (or by referral of the client to any subsidiary or affiliated company), either for a permanent, temporary (including assignments through another agency), or consulting positions during my assignment or after my assignment has ended.

SIGNED:	 DATE:
(Comdidate)	

Do you have any friends who might like to apply with us? If so, please provide names and phone numbers: