



Application for Employment

We are an equal opportunity employer and make employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age, or disability. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law.

Applicant name: _____ Date: _____

Job Position(s) applied for or type of work desired: _____

Address: _____

Telephone #: _____ Social Security #: _____

Type of employment desired: _____ full-time _____ part-time _____ temporary

Date you will be available to start work: _____

Are you able to meet the attendance requirements? _____ Yes _____ No

Do you have any objection to working overtime if necessary? _____ Yes _____ No

Can you travel if required by this position? _____ Yes _____ No

If you are under 18, can you furnish a work permit if it is required? _____ Yes _____ No

Driver's license number (*if driving is an essential job duty*): _____

How were you referred to us? _____

Employment History

Please provide all employment information for your past three employers starting with the most recent.

1. Employer: _____
Position/s held: _____
Address: _____
Telephone#: _____
Immediate supervisor and title: _____
Dates employed: from _____ to _____ Salary: _____
Summary of duties: _____

_____ Reason
for leaving: _____

2. Employer: _____
Position/s held: _____
Address: _____
Telephone#: _____
Immediate supervisor and title: _____
Dates employed: from _____ to _____ Salary: _____
Summary of duties: _____

_____ Reason
for leaving: _____

3. Employer: _____
Position/s held: _____
Address: _____
Telephone#: _____
Immediate supervisor and title: _____
Dates employed: from _____ to _____ Salary: _____
Summary of duties: _____

_____ Reason
for leaving: _____

Other Skills and Qualifications

Summarize any job-related training, skills, computer knowledge, licenses, certificates, and any other information you believe is relevant to your qualifications for this job:_____

Educational History

TYPE OF SCHOOL	NAME OF SCHOOL	MAJOR & DEGREE or COMPLETED	YEARS
High School			
College			
Bus. or Trade School			
Professional School			

References

List 3 references, including their names, telephone numbers, and years known (do not include relatives or employers):

1. _____

2. _____

3. _____

Release

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references.

I understand that any intentional misrepresentation or material omission made by me on this application may constitute grounds for rescission of a job offer or immediate termination of employment if I am employed, without notice, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that this is a drug free workplace and consent to compliance with this policy as a condition of employment.

I also understand that, if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I have read and fully understand the foregoing statements and I seek employment under these conditions.

Applicant signature: _____ Date: _____



BACKGROUND RELEASE & AUTHORIZATION FORM

(Please clearly print information below and provide copy of driver's license and social security card)

_____ LAST	_____ FIRST	_____ MIDDLE	_____ MAIDEN
_____ DATE OF BIRTH	_____ SOCIAL SECURITY	_____ DRIVER'S LICENSE NO. \ STATE OF ISSUE	
_____ SEX	_____ RACE	_____ PHONE NUMBER	_____ EMAIL

PLEASE PROVIDE US WITH YOUR HOME ADDRESS FOR THE PAST *SEVEN* YEARS.

CURRENT: _____ City/St/Zip _____	COUNTY or PARISH _____ FROM (YRS): _____ TO _____
PREVIOUS: _____ City/St/Zip _____	COUNTY or PARISH _____ FROM (YRS): _____ TO _____
PREVIOUS: _____ City/St/Zip _____	COUNTY or PARISH _____ FROM (YRS): _____ TO _____
PREVIOUS: _____ City/St/Zip _____	COUNTY or PARISH _____ FROM (YRS): _____ TO _____

Have you ever been convicted of a criminal offense? Yes No If yes, please provide details and dates.

I certify that all statements are complete and correct, and agree that (A) former employers, colleges, and Universities are authorized to furnish info concerning this application, and are released from all liability for furnishing such information (B) that I may be checked through background service providers used by DATCS, including a request to the Dept of Motor Vehicles, Division of Driver's Licenses, for a list of all violation of the Motor Vehicle Code (C) a credit check, and (D) that any misrepresentation or omission made by me in this application or any supplement hereto will be sufficient grounds for immediate termination by an employer or organization.

I hereby authorize the addressed police department and court houses to furnish DATCS and its service providers any criminal or traffic information they may have on record or otherwise, and do hereby release the addressed institution and all individual's connected therewith from all liability for any damage whatsoever incurred after furnishing such information. Test results will not be released to anyone other than the entities listed below. The foregoing authority shall continue in force until revoked in writing or judicial authority.

_____ APPLICANT SIGNATURE	<i>Design Center Signs 2940 F</i> _____ REQUESTING COMPANY or PARTY	_____ DATE
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*Complete Background check at: datcs.certifiedscreen.com or Email completed forms to backgroundchecks@datcs.com for processing