Company Name	Date
Please Print Clearly APPLICATIO	ON FOR EMPLOYMENT
Please Answer All Questions. Résumé	s Are Not A Substitute For A Completed Application.
REPRESENTATIVE IS INTENDED TO CREATE OR DONO OF EMPLOYMENT FOR A DEFINITE TERM. I ACKNOW AN AT-WILL BASIS IN ACCORDANCE WITH STATE EMPLOYMENT AT ANY TIME, WITH OR WITHOUT CA AND ACCEPTANCE OF EMPLOYMENT IS NOT A CON' I AM FREE TO TERMINATE MY EMPLOYMENT WITH PROVISION MAY BE MODIFIED OR WAIVED ONL REPRESENTATIVE OF THE COMPANY AND ME. I ACCOMPANY, AND I UNDERSTAND THAT THE COMPANY REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL ARBITRATION POLICY, IF ANY.	ATION NOR ANY COMMUNICATION BY A MANAGEMENT ES CREATE A CONTRACT OF EMPLOYMENT, OFFER, OR PROMISE VLEDGE THAT IF HIRED BY THE COMPANY, EMPLOYMENT IS ON LAW. THIS MEANS THE COMPANY IS FREE TO TERMINATE MY MUSE OR ADVANCE NOTICE, IN ACCORDANCE WITH STATE LAW FRACT OF EMPLOYMENT FOR ANY SPECIFIED TIME. SIMILARLY, THE COMPANY AT ANY TIME FOR ANY REASON. THIS AT-WILL Y IN A WRITTEN AGREEMENT SIGNED BY AN AUTHORIZED GREE TO CONFORM TO THE RULES AND REGULATIONS OF THE NY HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND L. NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL OR ITS ered for positions without regard to race, religion, sex, national origin, age, ble federal, state, or local laws.
Position Applied For	Name
Telephone Number () Alter	rnate or Cellular Telephone Number ()
Present AddressStreet, Apt. or Unit No./City/State/Zip	How long have you lived there/
Previous Address Street, Apt. or Unit No./City/State/Zip	How long did you live there// Years Months
Desired Salary/Hourly Rate	
If under the age of 18, can you produce the necessary work certifier Type of employment desired? Full-time □	Ficate at the time of employment? Yes □ No □ Part-time □ (Specify Hours)

INSTRUCTIONS FOR ANSWERING THE NEXT TWO QUESTIONS:

Have you previously applied for employment with this Company? Yes ☐ No ☐

Hawaii applic ants: Do not answer the following two questions. I.

Are you willing to work overtime? Yes \(\Pi\) No \(\Pi\)

District of Co lumbia and Washington applicants: Limit any response to the past ten (10) years. 2.

separation from employment.

- Utah applican ts: Limit any response to felony convictions only. 3.
- 4. Arizona, District of Columbia, Illinois, Missouri, Rhode Island and Utah applicants: Do not respond to second question regarding

If Yes, when and where did you apply?

Have you ever been employed by this Company? Yes 🗆 No 🗅 If Yes, provide dates of employment, location, and reason for

Date on which you can start work if hired _____

5. California applicants: Do not include misdemeanor marijuana-related convictions that are more than two (2) years old or misdemeanor convictions for which probation was successfully completed or otherwise discharged and the case was judicially dismissed.

- Massachusetts applicants: Limit any response regarding misdemeanor convictions to the last five (5) years and to those which were not a first offense for drunkenness, simple assault, speeding, a minor traffic violation or disturbing the peace. Applicants with a sealed record on file with the Massachusetts Commissioner of Probation may answer "No Record" with respect to: 1) all inquiries relating to prior convictions or arrests; 2) misdemeanor convictions older than five (5) years; and 3) first time convictions for simple assault, drunkenness, speeding, minor traffic violations or disturbing the peace. North Dakota and Oregon applicants: Regarding arrests, limit your response to pending charges that are less than one (1) year old.
- Indiana applicants: Regarding arrests limit your response to pending charges for felonies and class A misdemeanors that are less than

one (1) year old. 9.

Michigan applicants: Regarding arrests, limit your response to felony arrests awaiting conviction or dismissal.

- 10. Connecticut applicants: You are not required to disclose the existence of any arrest, criminal charge, or conviction, the records of which have been erased. Criminal records subject to erasure are records pertaining to a finding of delinquency or the fact that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nolled (not prosecuted), a criminal charge for which the person was found not guilty, or a conviction for which the offender received an absolute pardon. Any person whose criminal records have been erased is deemed to have never been arrested within the meaning of the law as it applies to the particular proceedings that have been erased, and may so swear under oath

11. New York applicandenial within 30 da	its: An ex-offender who is denied employs of the applicant's request for such information	yment may, upon wi	ritten request, re	ceive a stateme	nt of the reason(s) for
12. All applicants: Do	not include convictions that were sealed, to a diversion program.	eradicated, erased,	annulled by a co	ourt, or expunge	ed, or convictions that
Have you ever plead gu Yes □ No □	ilty or no contest to, or been convicted o	f any criminal offer	ase other than th	e applicable exc	ceptions listed above?
Have you ever been arre	sted for any matters for which you are ou	t on bail or on your	own recognizano	e pending trial	? Yes 🗆 No 🖸
CRIMINAL OFFENSE	S ONLY: If you answered Yes, to eithe ve instructions so that individual circumst	r of the above two	questions, pleas		
nature of the crime, its frequency of conviction jail sentence, the applica	arrests will not automatically disqualif seriousness, whether the conviction(s) s s, the applicant's age at the time of con ant's entire work and educational history	substantially relates viction, the time else, and employment	s to the position apsed since the	's functions an date of convict	nd qualifications, the ion or completion of
Have you ever initiated a	an act of violence in the workplace? Yes	s 🗆 No 🔾			
If Yes, please provide the disqualify you from emp	e date(s) and explain so that individual cir loyment.)	rcumstances can be	considered. (A '	'Yes" answer w	ill not necessarily
List all special technical software, equipment open	skills that you feel qualify you for the job ration, special tools or machines, etc.)	for which you are a	pplying (e.g., co	mputer progran	nming/language,
Education	School Name and Location	Course of Study	Graduate?	# of Years Completed	Degree/Major
High School	į				
College				***** <u>***</u>	
Bus./Tech./Trade or Post College					
Honors Received			- ma-	- 114W	
Is any additional informat and educational record?	ion relative to change of name, use of an	assumed name, or n	ickname necessa	ary to enable a c	heck on your work

REFERENCES

Please list the names of additional work-related references we may contact. Individuals with no prior work experience may list school or volunteer related references.

NAME	POSITION	COMPANY	WORK RELATIONSHIP (i.e., supervisor, co-worker)	TELEPHONE
		447		
<u> </u>				

Please list the names of personal references (not previous employers or relatives) who know you well that we may contact.

NAME	OCCUPATION	ADDRESS	TELEPHONE NUMBER	NUMBER OF
				YEARS KNOWN

APPLICANT CERTIFICATION

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

I understand that the Company may now have, or may establish, a drug-free workplace or drug and/or alcohol testing program consistent with applicable federal, state, and local law. If the Company has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. I also understand that all employees of the location, pursuant to the Company's policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and drug testing consistent with the Company's policies and applicable federal, state, and local law.

If employed by the Company, I understand and agree that the Company, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, and computers) and, in certain circumstances, my personal property.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign a confidentiality, non-compete, and/or conflict of interest statement.

I certify that all the information on this application, my résumé, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

I UNDERSTAND THAT NEITHER THIS APPLICATION NOR ANY COMMUNICATION BY A MANAGEMENT REPRESENTATIVE IS INTENDED TO CREATE OR DOES CREATE A CONTRACT OF EMPLOYMENT, OFFER, OR PROMISE OF EMPLOYMENT FOR A DEFINITE TERM. I ACKNOWLEDGE THAT IF HIRED BY THE COMPANY, EMPLOYMENT IS ON AN AT-WILL BASIS IN ACCORDANCE WITH STATE LAW. THIS MEANS THE COMPANY IS FREE TO TERMINATE MY EMPLOYMENT AT ANY TIME, WITH OR WITHOUT CAUSE OR ADVANCE NOTICE, IN ACCORDANCE WITH STATE LAW, AND ACCEPTANCE OF EMPLOYMENT IS NOT A CONTRACT OF EMPLOYMENT FOR ANY SPECIFIED TIME. SIMILARLY, I AM FREE TO TERMINATE MY EMPLOYMENT WITH THE COMPANY AT ANY TIME FOR ANY REASON. THIS AT-WILL PROVISION MAY BE MODIFIED OR WAIVED ONLY IN A WRITTEN AGREEMENT SIGNED BY AN AUTHORIZED REPRESENTATIVE OF THE COMPANY AND ME. I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF THE COMPANY, AND I UNDERSTAND THAT THE COMPANY HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL OR ITS ARBITRATION POLICY, IF ANY.

WORK EXPERIENCE: Please list the names of your present or previous employers in chronological order with present or last employer listed first. Account for <u>all</u> periods of time including any period of unemployment. If self-employed, supply firm name and business references. You may include any verifiable work performed on a volunteer basis, internships, or military service. Your failure to completely respond to each inquiry may disqualify you for future consideration from employment.

Name		Address	Турс	e of Busine	?\$\$		
Telephone ()	Dates Employed: From	/	/	To	/	/_
Job Title	···	Duties					
Supervisor's Name		May we contact? ☐ Yes ☐ No	If No, why n	ot?		,	
Wages: Start	Final	Reason for Leaving					
What will this employer	say was the reason	your employment terminated?					
How much notice did yo	u give when resigni	ng? If none, explain.					
Employer							
Vame		Address	<u> </u>	Тура	of Busin	ness	
Геlерһопе (Dates Employed: From	/		То	/	/_
lob Title		Duties					
Supervisor's Name		May we contact? ☐ Yes ☐ No I.	f No, why no	ι?			
Wages: Start	Final	Reason for Leaving					
low much notice did you		our employment terminated?					
How much notice did you		ng? If none, explain.					
How much notice did you Employer	n give when resignin	Address	**************************************	Туре	of Busin	iess	
How much notice did you Employer Hame Telephone (n give when resigning	Address Dates Employed: From		Type	of Busin	ness	
How much notice did you imployer lame lelephone (give when resigning	Address Dates Employed: From Duties		Type	of Busin	ness /	
How much notice did you Employer Iame Telephone (ob Title upervisor's Name	give when resigning	Address Dates Employed: From Duties May we contact? Yes No If	/ No, why not	<i>Type</i>	of Busin Γο	aess /	
How much notice did you Employer Vame Telephone (give when resigning the second	Address Dates Employed: From Duties May we contact? Yes No If Reason for Leaving	/ No, why not	<i>Type</i> /?	of Busin	ness /	
How much notice did you Employer Vame Telephone (give when resigning the second	Address Dates Employed: From Duties May we contact? Yes No If	/ No, why not	<i>Type</i> _/	of Busin	ness	
Iow much notice did you Imployer Iame Telephone (pive when resigning the property of the proper	Address Dates Employed: From Duties May we contact? Yes No If Reason for Leaving our employment terminated? g? If none, explain	/ No, why not	<i>Type</i> _/	of Busin	ness	
Iow much notice did you Imployer Iame Telephone (i give when resigning — Final ay was the reason your give when resigning	Address Dates Employed: From Duties May we contact? Yes No If Reason for Leaving our employment terminated?	/ No, why not	<i>Type</i> /?	of Busin	ness /	

I authorize the Company or its agents to confirm all statements contained in this application and/or résumé as it relates to the position I am seeking and to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation.

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. I hereby release, discharge and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to the Company or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the Company and its representative for seeking such information and all other persons, corporations, or organizations furnishing such information.

If hired by this Company, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this Company. I also understand this Company employs only individuals who are legally eligible to work in the United States for this Company.

THIS APPLICATION WILL BE CONSIDERED ACTIVE FOR A MAXIMUM OF SIXTY (60) DAYS. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY.

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

AND COMPLETE.

Applicant Signature If the applicant is a minor, the foregoing release and consent must be signed by the applicant's parent or legal guardian. Signature by the applicant's parent or legal guardian constitutes acknowledgement by the applicant and the parent or legal guardian that the Company, to the extent permitted by federal, state, and local law, can test the applicant for controlled substances, conduct inspections of property without notice, and communicate screen results to Company personnel who need to know, the applicant, and the applicant's legal guardian. Parent/Legal Guardian Witness Date Date UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100. I have read and understand the above statement. Applicant's Signature UNDER MASSACHUSETTS LAW, IT IS UNLAWFUL FOR AN EMPLOYER TO REQUIRE OR TO ADMINISTER A LIE DETECTOR TEST AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT. FEDERAL AND/OR STATE LAW MAY PROHIBIT THE USE OF POLYGRAPH OR SIMILAR TESTS AS WELL. THIS APPLICATION MAY NOT BE APPLICABLE FOR ALL INDUSTRIES.