

Prospective employees will receive consideration without discrimination based on race, creed, color, sex, age, national origin, veteran status, marital status, disability, handicap, sexual orientation, citizenship status or any condition prescribed by state or local law.

# APPLICATION FOR EMPLOYMENT

|                                      |  |  |  |       |        |  |  |
|--------------------------------------|--|--|--|-------|--------|--|--|
| P<br>E<br>R<br>S<br>O<br>N<br>A<br>L | Last Name  |  |  | First | Middle | Date   |  |
|                                      | Street Address   |  |  |       |        | Home Telephone<br>(     )  |  |
|                                      | City, State, Zip   |  |  |       |        | Business or Cell Telephone<br>(     )  |  |
|                                      | Have you ever applied for employment with us?<br><input type="checkbox"/> Yes <input type="checkbox"/> No   If yes: Month and Year _____ Location _____  |  |  |       |        | Social Security #  |  |
|                                      | Position Desired   |  |  |       |        | Pay Expected   |  |
|                                      | Apart from absence for religious observance, are you available for full-time work?<br><input type="checkbox"/> Yes <input type="checkbox"/> No   If not, what hours can you work? _____  |  |  |       |        | Will you work overtime if asked?<br><input type="checkbox"/> Yes <input type="checkbox"/> No                             |  |
|                                      | Are you legally eligible for employment in the United States?  |  |  |       |        | When will you be available to begin work? _____  |  |
|                                      | Have you been convicted of any crimes in the past ten years, excluding misdemeanors and summary offenses, which have not been annulled, expunged or sealed by a court?<br><input type="checkbox"/> Yes <input type="checkbox"/> No   If "Yes," describe in full. |  |  |       |        | Have you ever been bonded?<br><input type="checkbox"/> Yes <input type="checkbox"/> No<br>If "Yes," with what employers? |  |
|                                      | Other special training or skills (languages, machine operation, etc.)  |  |  |       |        |  |  |

| E<br>D<br>U<br>C<br>A<br>T<br>I<br>O<br>N | School                        | Name and Location of School | Course of Study | No. of Years Completed | Did you Graduate?   | Degree or Diploma |
|---|-------------------------------|-----------------------------|-----------------|------------------------|---|-------------------|
|   | Graduate                      |                             |                 |                        | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |                   |
|   | College                       |                             |                 |                        | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |                   |
|   | Business /Trade/<br>Technical |                             |                 |                        | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |                   |
|   | High School                   |                             |                 |                        | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |                   |
|   | Elementary                    |                             |                 |                        | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |                   |

# EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer.

|          |   |   |
|----------|---|---|
| <b>1</b> | Company Name                                    | Telephone<br>(     )  |
|          | Address   | Employed - (State month and year)<br>From                      To |
|          | Name of Supervisor                              | Weekly pay<br>Start                      Last                     |
|          | State Job Title and Describe Your Work<br>_____ | Reason for leaving  |

|          |   |   |
|----------|---|---|
| <b>2</b> | Company Name                                    | Telephone<br>(     )  |
|          | Address   | Employed - (State month and year)<br>From                      To |
|          | Name of Supervisor                              | Weekly pay<br>Start                      Last                     |
|          | State Job Title and Describe Your Work<br>_____ | Reason for leaving  |

|          |   |   |
|----------|---|---|
| <b>3</b> | Company Name                                    | Telephone<br>(     )  |
|          | Address   | Employed - (State month and year)<br>From                      To |
|          | Name of Supervisor                              | Weekly pay<br>Start                      Last                     |
|          | State Job Title and Describe Your Work<br>_____ | Reason for leaving  |

|          |   |   |
|----------|---|---|
| <b>4</b> | Company Name                                    | Telephone<br>(     )  |
|          | Address   | Employed - (State month and year)<br>From                      To |
|          | Name of Supervisor                              | Weekly pay<br>Start                      Last                     |
|          | State Job Title and Describe Your Work<br>_____ | Reason for leaving  |

|  |  |
|--|--|
| We may contact the employers listed above unless you indicate those you do not want us to contact. | <b>DO NOT CONTACT</b>                  |
|  | Employer Number (s) _____ Reason _____ |

|   |  |                           |
|---|--|---------------------------|
| <b>MILITARY</b>   | Did you serve in the U.S. Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No | If "Yes," in what Branch? |
| Describe any training received relevant to the position for which you are applying.<br>_____<br>_____ |  |                           |

## Additional Information

Membership in professional and civic organizations, special accomplishments, awards, etc.  
*(Exclude those which may disclose your race, color, religion, age or national origin)*

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## Applicant's Signature

Please read and understand this statement before signing your application:

The information I have provided in this Application for Employment is true, correct and complete. False, incomplete or misrepresented information of any kind, will be sufficient cause for my application to be rejected or, if discovered after I am employed, cause for immediate termination of my employment.

I authorize the employer to contact and obtain information about me from previous employers, educational institutions and "references" I provided, and any other party necessary to verify the accuracy of information I disclosed in this application, a related employment resume or a personal interview. To assist in the processing of my Application, I waive all rights and claims I may otherwise have against the employer or its representatives, for seeking, and using information to evaluate my employment request and all other persons, corporations or organizations who provide information for this purpose.

This application will expire in 30 days. After that date, unless otherwise notified, I understand that my status as an applicant will end. I may re-apply for employment in the future by completing a new application.

This application is not an employment agreement. If I accept an offer of employment I understand the employer may terminate my employment at any time, with or without cause and without prior notice, unless required by law. I understand that no one, other than an executive officer of the employer, has authority to enter into any employment agreement with terms contrary to the foregoing and then only in writing signed by such officer.

I fully understand and accept all terms and conditions in the above statement.

\_\_\_\_\_ Date

\_\_\_\_\_ Signature

| REFERENCE CHECK | Employer | Person Contacted | Results |
|-----------------|----------|------------------|---------|
|                 | 1        |                  |         |
|                 | 2        |                  |         |
|                 | 3        |                  |         |
|                 | 4        |                  |         |

| TEST RESULTS | Tests Administered | Raw Score | Rating | Analysis and Comments |
|--------------|--------------------|-----------|--------|-----------------------|
|              |                    |           |        |                       |
|              |                    |           |        |                       |
|              |                    |           |        |                       |
|              |                    |           |        |                       |

| INTERVIEW RESULTS | Interviewer Name and Comments |
|-------------------|-------------------------------|
|                   |                               |
|                   |                               |

Jandl Productions believes that the information solicited from the applicant is in full compliance with all Federal and State equal employment laws and with the Fair Credit Reporting Act. We do not assume responsibility for the user's inclusion in this "Application for Employment" of any question which may violate Federal, State or local laws and users should consult their own counsel with respect to any legal questions concerning the use of this form.