

# APPLICATION FOR EMPLOYMENT

DATE \_\_\_\_\_

**Equal Employment Opportunity Statement:**

Employment decisions will be based on the principles of equal opportunity. All personnel actions (recruiting, hiring, training, promotion, compensation, etc.) are administered without regard to any characteristic protected by state, federal or local law, assuming said characteristic does not interfere with the performance of essential job functions. Reasonable accommodations will be made for disabilities and religious beliefs, and any other characteristic protected by state, federal or local law. Please inform the Supervisor of any necessary accommodations

<b>Applicant Name:</b> First	Middle	Last

Address	City	State	Zip

Telephone Number	Email Address

Salary Desired: \_\_\_\_\_

Are you 18 years of age or older?  No  Yes

On what date would you be available for work? \_\_\_\_\_

Are you available to work:  Full-time  Part-time

If hired, can you work: 1. On-Call:  No  Yes 2. Weekends:  No  Yes

Are you currently employed?  No  Yes

Do you have previous experience working in our industry?  No  Yes

If yes, When: \_\_\_\_\_ What Company: \_\_\_\_\_

Have you ever been employed with us before?  No  Yes—Date: \_\_\_\_\_

Location: \_\_\_\_\_

Are you related to or know anyone who had worked at Apex Companies or is currently working at any of the APEX Companies?  No  Yes—Specify the name of the person: \_\_\_\_\_

How did you learn about this position? \_\_\_\_\_

If the job requires one, do you have a current VALID Driver's License?  No  Yes

## EMPLOYMENT HISTORY

**NAME OF COMPANY**

Supervisor

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City and State

Phone

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Position Title and Duties

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Starting Date

Ending Date

Why did you leave this job

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**NAME OF COMPANY**

Supervisor

--	--

City and State

Phone

--	--

Position Title and Duties

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Starting Date

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Why did you leave this job

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**NAME OF COMPANY**

Supervisor

--	--

City and State

Phone

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Position Title and Duties

--

Starting Date

Ending Date

Why did you leave this job

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## EDUCATION

School:	Number of years:
Schooling/Training received:	
School:	Number of years:
Schooling/Training received:	

## WORK REFERENCES

Name and Relationship (i.e., co-worker, supervisor, etc)	Phone or Email

## APPLICANT'S STATEMENT

I certify that the information provided in this application is true, to the best of my knowledge.

I understand that providing false or misleading information at any time during the application and interview process may lead to refusal to hire or discharge from APEX Companies ('Company'). If I become employed by the Company, I agree to follow all rules and regulations of the Company as they develop and change.

I allow the Company to conduct investigations on me, my background and my performance, and am aware that such investigations will become a part of my employment record. With this, I authorize the Company to speak with my acquaintances, personal and professional, to gather information about me.

I authorize all former employers and references to provide any information about me to the Company, and release them of any and all liabilities and damages of all kinds for providing this information. I authorize the Company to verify the accuracy of the information within this application. I also authorize the release of my educational transcripts to the Company for education verification purposes.

I release APEX Companies from any and all liability for collecting information about me and using it to make employment decisions.

I understand that employment at the Company is employment at-will. Employment at-will may be terminated at the will of either me or the Company at any time with or without cause. Terms and conditions of employment with the Company may be modified at the sole discretion of the Company with or without cause and with or without notice.

I agree that if I become indebted to the Company, I will be responsible for repaying the total owed upon termination from the Company. If I do not repay the sum prior to my final paycheck being received, the money owed will be deducted from my pay based on a prior deductions authorization.

I understand that my employment with the Company is contingent upon a successful background check including an acceptable credit history.

This application for employment is valid for the next ninety (90) days. I understand that if I wish to be considered for employment after this period of time, I must apply again.

Signature of Applicant	Date