

APPLICATION OF EMPLOYMENT

It is the policy of this company to provide equal employment opportunities to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, any disability as defined in the Americans with Disabilities Act, or veteran status or any other legally protected status.

Note: Please type or print your answers. If you print, please do so in blue or black ink and write neatly. An illegible application may preclude you from consideration.

PERSONAL INFORMATION

First Name	Middle Initial	La	st Name		
Current Address:					
Street and Apt. #	City	State	Zip Code		
Home phone:	Cell phone:		E-mail:		
Social Security #:	Dri	ver's License #:	Sta	ate:	
I am an U.S. Citizen or otherwise authorized to work in the United States on an unrestricted basis: Proof of citizenship or immigration status will be required upon employment. Yes No					
Have you ever been convicted of If you answered yes, please state applicant from employment.					
Do you have the ability, with or without reasonable accommodations, to work overtime or to travel if travel and/or overtime are require by the job for which you are applying?					
If under 18 years of age, can you Have you ever filed an application Have you ever been employed by Are you currently employed? Are you currently on "lay-off" stat How did you learn of our compan Are you now, or do you expect to If Yes, please explainAre there any days or hours you	provide required proof on with our company befor your company before? us and subject to recall? y and/or position? be, working in any other would be unable or unwi	of your eligibility to re? business or job?	work?	No	
If Yes, please specify the last there any type of work which years are splain	ou will not perform?	would be unable (or unwilling to work		

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Last Name:	_ First Name:		Middle Initial:		
EDUCATION					
Name, Address & Location	Graduate?		Courses Studied		
High School	Circle highest Grade completed	☐ Yes	Diplome		
	·		Diploma:		
College	9 10 11 12 Circle highest	□ No			
	Grade completed	☐ Yes	Major: Minor:		
	1 2 3 4 4+	□ No			
Trade School	Number of		Degree(s):		
	Months attended	☐ Yes	Diploma or Certificate:		
		□ No			
If you did not graduate, why did you leave Are you planning to pursue further studies	high school or college	?			
Are you planning to pursue further studies	? 🗆 Yes 🗆 No If so,	when, where	and what courses?		
List any scholastic honors, offices held an those which may reflect race, sex, of protected status)	color, religion, national	origin, disabili	ty, sexual orientation or other		
Please describe any other special courses which you are applying.					
MILITARY					
Have you ever served in the U.S. Military? If yes, please provide the following informations are branch of Service:	ation:				
Did you receive an Honorable discharge?	□ Yes □	No			
What duties, training or experience did you		arv which ma	v he ioh related?		
		ary willon ma	y be job related:		
Special Honors:					
CAPABILITY / RELIABILITY					
Would you be willing and able to perform all of the tasks required by the job you are applying for? ☐ Yes ☐ No If No, explain which tasks					
Have you filed any type of fraudulent claim against any of your present or past employers? ☐ Yes ☐ No					
If yes, please explain Will you abide by the safety rules of this co					
Have you ever been disciplined for violating lf yes, please explain	ng company safety rule	s or regulation	s? □Yes □No		
How many days of work (or school) have					
How many times have you been late for w Consistent attendance and punctuality are and able to report to work on time every di If no, please explain	essential requirement	s of every job	in our company. Would you be willing		
Have you ever been disciplined or receive If yes, please explain	d verbal or written warr	nings for abse	nteeism or tardiness? ☐ Yes ☐ No		
Have you ever been fired, or asked to resi	Have you ever been fired, or asked to resign from a job? Yes No If yes, please explain				

Last Name:	_ First Name:	Middle Initial:
EMPLOYMENT HISTORY		
Present or Most Recent Employer]	
Employer:	Address	s:
Telephone Number:	City, Sta	ate Zip:
Your Position:	Salary: _	
Duties:		
Dates of Employment:	to	
Supervisor:	Title	May we contact? □ Yes □ No
Name Reason for		
Leaving:		
Prior Employer	White the state of	
Employer:	Address	S
Telephone Number:		ate Zip:
Your Position:		
Dates of Employment:		
Supervisor:Name	Title	May we contact? □ Yes □ No
Reason for Leaving:		
	A AMARIA A A A A A A A A A A A A A A A A A A	
WARRANTINE STATE OF THE STATE OF		
Prior Employer		
Employer:	Address	6
Telephone Number:	City, Sta	ate Zip:
Your Position:	Salary: _	
Duties:		
Dates of Employment:t	to	
Supervisor:		May we contact? □ Yes □ No
Name	Title	
Reason for Leaving:		

Last Name:	First Name:	Middle Initial:		
SPECIAL SKILLS				
Do you type? ☐ Yes ☐ No Please list all software progra with each:	Words Per Minute ams in which you are proficient, indicatir	g how many years work experience you have		
List other computer skills, programming languages, or computer training you have had:				
List other technical training, skills or work experience which may qualify you for a job with us:				
Please describe why you are particularly qualify you or a p	interested in working for our company a osition with us.	and to list those skills and abilities which you feel		
Languages Spoken (other tha	an English):			
REFERENCES: Give name, address and tele employers.	phone number of three references who	are not related to you and are not previous		
1 2 3				
knowledge. If I am employed cause for my dismissal. I her	, I understand that any false statements	olication are true and complete to the best of my on this application shall be considered sufficient ents contained in this application for employment		
with this organization is of a Employer may discharge Er employment relationship ma	an <i>"at will"</i> nature, which means that mployee at any time with or without c	d by applicable law, any employment relationship the Employee may resign at any time and the ause. It if further understood that this "at will" cument or by conduct unless such change is s organization.		
Signature:		Date		

	_			
Interviewed by: Interviewers remarks:	Company Use Only	•		
le the operation of a service	v vehicle a ich requirement?	J. No.		
	y vehicle a job requirement? □ Yes □ t for driver's record been made? □ Ye			



Authorization to Release Information

The below signed do hereby authorize the release of all information requested by Professional Equities, Inc., for the use in their employment screening process. This information is to be obtained from the appropriate sources and includes:

- 1. Credit Report
- Verification of Employment (VOE)
- 3. Criminal background record check from appropriate state, county and or local municipality.
- 4. Driving record check from appropriate state agency

This release is given with my full consent and knowledge on this day of		
, 20		
Applicant Signature	Applicant SSN	
Applicant Printed Name	Applicant Date of Birth	
Home Street Address	City State Zip	