



EMPLOYMENT APPLICATION

Please complete application and return to the office

PRINT NAME

TODAY'S DATE

INTERVIEW DATE _____

INTERVIEWED BY _____

ADDITIONAL NOTES _____

BACKGROUND QUESTIONS

FOR WHICH POSITION ARE YOU APPLYING? *Please be specific. Applications for "any" job will not be considered.*

1st Choice _____ **2nd Choice** _____ **3rd Choice** _____

ARE YOU SKILLED ON A COMPUTER? Yes No

LIST PROGRAMS YOU ARE FAMILIAR WITH _____

DO YOU HAVE ANY WORK-RELATED MILITARY EXPERIENCE IN A FEDERAL OR STATE UNIT? Yes No

IF "YES," PLEASE EXPLAIN _____

HAVE YOU EVER BEEN AN EMPLOYEE OF THIS COMPANY UNDER YOUR OWN NAME OR ANOTHER NAME? Yes No

IF "YES," PLEASE GIVE NAME _____

HAVE YOU EVER BEEN TERMINATED OR ASKED TO RESIGN? Yes No

IF "YES," PLEASE EXPLAIN _____

DO YOU HAVE A MEANS FOR GETTING TO WORK REGULARLY? Yes No

IF AN OFFER OF EMPLOYMENT IS MADE, AND PRIOR TO YOUR COMMENCEMENT OF EMPLOYMENT DUTIES, YOU MAY BE REQUIRED TO UNDERGO A DRUG TEST, THE RESULTS OF WHICH MAY AFFECT THE OFFER OF EMPLOYMENT. ARE YOU WILLING TO UNDERGO SUCH DRUG TEST?

Yes No

HAVE YOU EVER BEEN CONVICTED OF A CRIME UNDER YOUR OWN OR ANOTHER NAME? *Do not include traffic tickets. Conviction of a crime or crimes will not necessarily disqualify you from employment.*

Yes No

IF "YES," STATE CRIME _____

CHARGE	DATE	COURT LOCATION
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DISPOSITION OF CASE _____

IF "YES," STATE CRIME _____

CHARGE	DATE	COURT LOCATION
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DISPOSITION OF CASE _____

ARE YOU OVER 18 YEARS OF AGE? Yes No

ARE YOU OVER 21 YEARS OF AGE? Yes No

IF NECESSARY, COULD YOU WORK OVERTIME? Yes No

IF NECESSARY, CAN YOU TRAVEL OR RELOCATE? Yes No

WHICH LANGUAGES ARE YOU FLUENT IN?

English Spanish Other _____

DO YOU HAVE A VALID NEVADA DRIVER'S LICENSE? Yes No

HAVE YOU EVER HAD YOUR DRIVER'S LICENSE SUSPENDED OR REVOKED? Yes No

FROM WHAT STATE(S) DO YOU CURRENTLY POSSESS A VALID DRIVER'S LICENSE? _____

LIST OUT-OF-STATE DRIVER'S LICENSE IDENTIFICATION NUMBER _____

EDUCATION

HIGH SCHOOL

NAME OF SCHOOL _____ GRADUATED? Yes No

GRADUATION DATE DEGREE MAJOR MINOR

COLLEGE

NAME OF SCHOOL _____ GRADUATED? Yes No

GRADUATION DATE DEGREE MAJOR MINOR

GRADUATE SCHOOL

NAME OF SCHOOL _____ GRADUATED? Yes No

GRADUATION DATE DEGREE MAJOR MINOR

TRADE OR BUSINESS SCHOOL

NAME OF SCHOOL _____ GRADUATED? Yes No

GRADUATION DATE MAJOR MINOR

CORRESPONDENCE SCHOOL

NAME OF SCHOOL _____ GRADUATED? Yes No

GRADUATION DATE DEGREE MAJOR MINOR

WHAT PROMPTED YOUR APPLICATION?

- Employment Agency Own accord Advertisement
- Employee Referral _____
NAME OF EMPLOYEE THAT REFERRED YOU
- Other _____

EMPLOYMENT HISTORY

Must be detailed and accurate to avoid disqualification.
Please list last five employers in chronological order.
Do not make any omissions.

NAME OF EMPLOYER		JOB POSITION		
ADDRESS		CITY	STATE	ZIP
PHONE NUMBER		NAME OF IMMEDIATE SUPERVISOR		
PREVIOUS PAY	EMPLOYED FROM	TO	REASON FOR LEAVING	

NAME OF EMPLOYER		JOB POSITION		
ADDRESS		CITY	STATE	ZIP
PHONE NUMBER		NAME OF IMMEDIATE SUPERVISOR		
PREVIOUS PAY	EMPLOYED FROM	TO	REASON FOR LEAVING	

Employment History Continued

_____ NAME OF EMPLOYER		_____ JOB POSITION		
_____ ADDRESS		CITY	STATE	ZIP
_____ PHONE NUMBER		_____ NAME OF IMMEDIATE SUPERVISOR		
_____ PREVIOUS PAY	EMPLOYED FROM	TO	REASON FOR LEAVING	

_____ NAME OF EMPLOYER		_____ JOB POSITION		
_____ ADDRESS		CITY	STATE	ZIP
_____ PHONE NUMBER		_____ NAME OF IMMEDIATE SUPERVISOR		
_____ PREVIOUS PAY	EMPLOYED FROM	TO	REASON FOR LEAVING	

_____ NAME OF EMPLOYER		_____ JOB POSITION		
_____ ADDRESS		CITY	STATE	ZIP
_____ PHONE NUMBER		_____ NAME OF IMMEDIATE SUPERVISOR		
_____ PREVIOUS PAY	EMPLOYED FROM	TO	REASON FOR LEAVING	

AFFIDAVIT — PLEASE READ CAREFULLY

I have truthfully disclosed all information asked for in this application.
I authorize contact with any person or entity named in this application and any other person or entity who may have knowledge concerning my past for the purpose of obtaining information material to my qualifications and suitability for employment.

I authorize all of those with whom I am acquainted — *previous employers, professionals, institutions, neighbors, friends, agencies asked to provide criminal conviction history and others* — to furnish any and all information they may have concerning me which may be material to my qualifications and suitability for the job for which I have applied.

Since all employees are hired for an indefinite and unspecified duration, none of these classifications guarantees employment for any specific length of time. I understand that nothing in this application is intended to imply or create an employment relationship or contract of employment. Employment is at the mutual consent of the employee and the company.

Accordingly, either the employee or the company can terminate the employment relationship at will, at any time, with or without cause or advance notice. Furthermore, no employee or representative of the company, other than the President, has any power or legal authority to alter the at-will nature of the employment relationship. The President can alter the nature of the relationship only if he expressly does so in a written agreement that is signed both by the President and the employee involved. This represents an integrated agreement with respect to the at-will nature of the employment relationship.

APPLICANT SIGNATURE

DATE

RECEIVED BY

DATE

INTERNAL USE ONLY

DATE INTERVIEWED

TIME

INTERVIEWER

EMPLOYMENT OFFERED? Yes No

OFFER CONDITIONED? Yes No

IF "YES," DESCRIBE _____

OFFER ACCEPTED? Yes No

IF NO OFFER MADE, STATE
LAWFUL REASON _____

JOB CLASSIFICATION

IF HIRED STARTING PAY _____ PER _____

EMERGENCY CONTACT

PHONE NUMBER