



## **Pre-Employment Application**

Our company is an equal opportunity employer and will consider all applicants for all positions equally without regard to their race, sex, age, color, religion, national origin, veteran status or any disability.

This application will be given every consideration, but its receipt does not imply that the applicant will be employed. Each question should be answered in a complete and accurate manner as no action can be taken on this application until all questions have been answered. I also understand that I may be required to complete additional testing to fulfill the application process. The company requests three (3) days advance notice for any accommodations necessary to complete the application process. The company will make every reasonable effort to provide an effective accommodation, if feasible.

Name:		Date:	/	/		
Present Address:	_City:	_State:	_Zip: _			
Social Security #: Home Are you over 21? yes no	Phone:					
Are you authorized to work in the U.S. for any employee	oyer?	☐ no				
Have you ever been convicted of, plead guilty to, or served probation for any crime (excluding minor traffic violations) including DWI?						
				_		
NOTE: A conviction will not necessarily disqualify you from employment.  Do you have any obligations or other reasons, which would limit your ability to travel or work overtime?  yes no lf yes, please explain:						
Would you be willing to relocate? ☐ yes ☐ no						
Driver's License #: State:	: Type: _					
EMPLOYMENT DESIRED:						
Are you seeking:	temporary or	summer em	ployme	nt		
Position applying for:	Salary o	desired:				
Do you have any friends/relatives working for our company? ☐ yes ☐ no						
Name of employee:	_					
Have you ever applied/worked for our company before? ☐ yes ☐ no						
If was inlease state when and where you applied and/or worked:						





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How did you learn of our company and/or position?					
Are you now or do you expect to be engaged in any other business or employment?					
☐ yes ☐ no					
Are there any days or hours you would be unable or unwilling to work?					
If yes, please specify those days or hours you would be unable or unwilling to work:					
Are there any reasons why you would be unable to perform the tasks involved in the position you are applying for?    yes  no					
If yes, please state reasons:					
EDUCATION:					
Name, Address and Location	Courses Studied				
High School					
College					
Trade School					
Use this space below to describe why you are inter and abilities that you feel particularly qualify you for continue on a separate sheet.	rested in working for our company. List those skills r a position with us. If you need more space, please				





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#### WORK HISTORY:

List names of employers in order with present or last employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references. Although a resume may be attached, this section must be completed.

#### PLEASE LIST MONTH AND YEAR

List Last Job First	Company Name and Address	Nature of Business	Pay	Position and Duties	Reason for Leaving	Supervisor and Phone #
From			\$		<b>.</b>	Name
То			\$			Phone
From			\$			Name
То			\$			Phone
From			\$			Name
То			\$			Phone
From			\$			Name
То			\$			Phone
From			\$			Name
То			\$			Phone

List three references, not relatives or former employers.

NAME ADDRESS PHONE

I certify that my answers to the foregoing questions are true and correct without any consequential omissions of any kind whatsoever. I understand that if I am employed, any false, and misleading, or otherwise incorrect statements made on this application form or during any interviews may be grounds for my immediate discharge.

I hereby authorize KEY BUSINESS SOLUTIONS to contact any company or individual it deems appropriate to investigate my employment history, character and qualifications and I give my full and complete consent to their revealing any and all information they wish as a result of this investigation. In addition, I hereby waive my right to bring any cause of action against those individuals for defamation, invasion of privacy or any other reason because of their statements.

I agree that, if I am employed, I will abide by all the rules and regulations of the company. I understand that the taking of drugs and alcohol tests, when given pursuant to company policy, are a condition of continued employment and refusal to take such tests when asked will be grounds for my immediate termination. I further understand that nobody at KEY BUSINESS SOLUTIONS is authorized to enter into any written or verbal employment contracts with me for any definite period of time without the express written consent of the Managing Member of KEY BUSINESS SOLUTIONS. I also understand that my employment is "at-will" and may be terminated by myself or by the company at any time for any reason or no reason at all, with or without prior notice.

Signature	Date	/ /	
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