



Relay Services: 1-800-RelayTX



## APPLICATION FOR EMPLOYMENT

### PERSONAL

Client Company Name: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Cell: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

Job applying for: \_\_\_\_\_ Job status applying for:  Full-Time  Part-time  Temporary

When are you available to begin work? \_\_\_\_\_

Are you legally eligible to be employed in the United States?  Yes  No  
*(Proof of identity and eligibility will be required upon employment)*

Are you over the age of 18 years?  Yes  No *(If no, you may be required to provide authorization to work)*

Have you ever worked for SWBC Professional Employer Services?  Yes  No

If yes, please provide the Client Company name and Job Title: \_\_\_\_\_

When? Please provide beginning and ending dates: From: \_\_\_\_\_ To: \_\_\_\_\_

Have you ever been convicted, or pled guilty or no contest to, a felony offense?  Yes  No

*(For purpose of employment with SWBC Professional Employer Services and the Client Company, "convictions" include sentenced to confinement, paid fine, time served, placed on probation (including deferred adjudication), and court-ordered restitution.)* If yes, describe conditions: \_\_\_\_\_

(Note: A conviction will not necessarily disqualify an applicant for employment)

If you are applying for a job that involves driving, please provide the following:

Driver's License number: \_\_\_\_\_ State Driver's License was issued: \_\_\_\_\_

What type of Driver's License do you have? Regular \_\_\_\_\_ Commercial \_\_\_\_\_ Class: \_\_\_\_\_

### EDUCATION & TRAINING

	High School	College(s)	Technical School(s)
Name of School			
Address of School			
Number of Years Completed			



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**SKILLS**

Please describe any specialized training and/or skills that would assist us in evaluating your application:

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<b>EMPLOYMENT HISTORY</b>		
Give name and address of last two (2) employers, beginning with your present or most recent employer.		
	Employer Information	Position
From (Month/Year)	Name	Describe Responsibilities
To (Month/Year)	Address	
Starting Pay	Supervisor	Reason for Leaving
Ending Pay	Phone Number	
	Employer Information	Position
From (Month/Year)	Name	Describe Responsibilities
To (Month/Year)	Address	
Starting Pay	Supervisor	Reason for Leaving
Ending Pay	Phone Number	

SWBC Professional Employer Services ("SWBC PEO") and the Client Company are equal opportunity employers and do not discriminate in recruitment, hiring, training, promotion, or other employment policies on the basis of age, race, sex, color, religion, national origin, disability, veteran status or any other basis that is prohibited by federal, state or local law.

I certify the answers given herein are true and complete to the best of my knowledge. I also authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.



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In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge regardless of time of discovery. I also understand that I am required to abide by all rules and regulations of SWBC PEO and the Client Company.

I agree and understand that if I am hired by the Client Company, my employment will be at-will, for an indefinite period of time, and may be terminated at any time, with or without cause or notice, at the option of the Client Company or myself.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_