

Fair Credit Reporting Act Disclosure and Authorization

Disclosure

As an applicant for employment or a current employee of this organization, you are a consumer with rights under the Fair Credit Reporting Act. When any of the following circumstances exist, this organization may choose to obtain and use information contained in either a consumer report or an investigative consumer report from a consumer reporting agency about you when: (1) considering your application for employment, (2) making a decision whether to offer you employment, (3) deciding whether to continue your employment (if you are hired), or (4) making other employment related decisions directly affecting you.

For explanation purposes, a “consumer reporting agency” is a person or business which, for monetary fees, dues or on a cooperative nonprofit basis, regularly assembles or evaluates consumer credit information or other information on consumers for the purpose of furnishing consumer reports to others, such as this organization.

A “consumer report” means any written, oral or other communication of any information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in establishing your eligibility for employment purposes.

An “investigative consumer report” means a consumer report or portion thereof in which information on your character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with your neighbors, friends, or associates reported on or with others with whom you are acquainted or who may have knowledge concerning any such items of information.

In the event an investigative consumer report is prepared, you may request additional disclosures regarding the nature and scope of the investigation requested as well as a written summary of your rights under the Fair Credit Reporting Act.

Authorization

By signing below, I hereby voluntarily authorize this organization to obtain either a consumer report or an investigative consumer report about me from a consumer reporting agency and to consider this information when making decisions regarding my employment at this organization. I understand that I have rights under the Fair Credit Reporting Act, including the rights discussed above.

Name

Date

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, sex, age, or disability or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Answer each question fully and accurately. No action can be taken on the application until you have answered all questions. Use blank paper if you don't have enough room on this application. Please print, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.

Job Applied for _____ Today's Date ___/___/___

Are you seeking Full-time ___ Part-time ___ Temporary ___ employment? When could you start work? ___/___/___

Last Name First Name Middle Initial Telephone Number

Present Street Address City State Zip Code

Are you 18 years of age or older Yes ___ No ___
(If you are hired, you may be required to submit proof of age.)

Social Security # (optional) _____ Email Address _____

If hired, can you furnish proof you are eligible to work in the US? Yes ___ No ___

Have you ever applied here before? Yes ___ No ___ If yes, when? _____

Were you ever employed here? Yes ___ No ___ If yes, when? _____

Have you ever been convicted of any law violation (exclude minor traffic violations)? Yes ___ No ___

If yes, give details _____
(A "yes" answer doesn't automatically disqualify you from employment, since the nature of the offense, date, and the job for which you are applying is considered.)

Have you ever had any bond coverage modified, revoked, or declined?..... Yes ___ No ___

If yes, please explain _____

If employed, do you expect to be engaged in any other business or employment?..... Yes ___ No ___

If yes, please explain _____

List professional, trade, business or civic activities and offices held. (Exclude labor organizations and membership which reveal race, color, religion, national origin, sex, age, disability or other protected status.) _____

List Name and Address of Schools # of yrs completed Diploma/Degree/Cert. Subject Studied

High School or GED: _____

College or University: _____

Vocational or Technical: _____

What skills or additional training do you have that relate to the job for which you are applying? _____

What machines or equipment can you operate that relate to the job for which you are applying? _____

List names of employers in consecutive 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. Note: A job offer may be contingent upon acceptable references from current and former employers.

NAME OF EMPLOYER		JOB TITLE AND DUTIES	
ADDRESS		DATES OF EMPLOYMENT (Mo/Yr): FROM TO	
CITY, STATE, ZIP CODE		PAY: START \$ FINAL \$	
SUPERVISOR	TELEPHONE	REASON FOR LEAVING	
NAME OF EMPLOYER		JOB TITLE AND DUTIES	
ADDRESS		DATES OF EMPLOYMENT (Mo/Yr): FROM TO	
CITY, STATE, ZIP CODE		PAY: START \$ FINAL \$	
SUPERVISOR	TELEPHONE	REASON FOR LEAVING	
NAME OF EMPLOYER		JOB TITLE AND DUTIES	
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CITY, STATE, ZIP CODE		PAY: START \$ FINAL \$	
SUPERVISOR	TELEPHONE	REASON FOR LEAVING	

Have you worked or attended school under any other name?Yes ____ No ____
 If yes, give names _____

Are you presently employed?Yes ____ No ____
 If yes, whom do you suggest we contact? _____

Have you ever been fired from a job or asked to resign?Yes ____ No ____
 If yes, please explain _____

Give three references, not relatives or former employers.

Name	Address	Phone #

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date. I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such person and organizations from any legal liability in making such statements.

I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying. I understand I may be required to successfully pass a drug screening examination. I hereby consent to pre-and/or post-employment drug screen as a condition of employment, if required.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE PRESIDENT OF THE ORGANIZATION HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE PRESIDENT AND EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE.

I have read, understand and by my signature consent to these statements.

Signature _____

Date _____