

Application for Employment

We consider applicants for all positions without regard to race, color, religion, sexual orientation, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap, or any other legally protected status.

(PLEASE PRINT)

Positions(s) Applied for:				Date of Application		
How Did You Learn Al						
Advertisement	F	riend	Walk - In			
Employment Age	ency R	elative	Other		_	
ast Name: First		First Name:		Middle Name:		
ddress (P.O. Box, Stree	et Number, Street Nam	ne)	City	State	Zip Co	ode
elephone: Home:	Cell:	Email:		SSN:		
етернопе. потпе.	Ceii.	Elliali.		33N.		
If you are under 18	 Years of age, can you រុ	orovide required	I proof of your eligibility	to work?	Yes	No
Have you ever filed	an application with us	before?			Yes	No
•	date					
· · · · · ·	employed with us bef				Yes	No
If yes, give	date					
Are you currently e	mployed?				Yes	No
May we contact you	ur present employer?				Yes	No
Are you prevented	from lawfully becomin	g employed in tl	nis Country because of V	isa or Immigration S	Status? Yes	No
(proof of cit	cizenship or immigratio	on status is requ	ired upon employment)			
On what date would	d you be available for v	work?				
Are you available to	work: Full Tir	ne Part [·]	Time Seasonal			
Can you travel if a jo	ob requires it?				Yes	No
	.:	ian from any pri	ior emplover?		Yes	No
Have you been tern	ninated or asked to res	igii iroiii aiiy pii	ior employer.			

EDUCATION

School Name	City, State	Major Course of Study	Highest Grade Completed Diploma/Degree
High School			
College			
Business/Technical/Trade School			

Activities, Honors, Offices Held that are job related
Describe Other Job Related Training Completed

U.S. Military Service

Branch/Duty/Location	Military Specialty	Highest Rank	Special Honors/Training Service School Attended

REFERENCES

Please list at least three NON-RELATED references, which are NOT previous employers.

Name	Telephone	Years Know	Occupation	
1				
1.				
2.				
3.				
4.				

EMPLOYMENT HISTORY (Begin with most recent position- Please explain fully any gaps in employment history)

Employer	Address	City/State	
Phone Number	Supervisor	Supervisor	
Date Employed	From	То	
Reason for Leaving: (please be specific)			
Employer:	Address	City/State	
Phone Number	Supervisor		
Thone Number	3upc1 v1301		
Date Employed	From	То	
Reason for Leaving: (please be specific)			
Employer	Address	City/State	
Phone Number	Supervisor		
Data Franksund	From	To	
Date Employed Reason for Leaving:	From	То	
(please be specific)			
Employer	Address	City/State	
Phone Number	Supervisor	Supervisor	
Date Employed	From	То	
Reason for Leaving: (please be specific)			
Employer	Address	City/State	
Phone Number	Supervisor	Supervisor	
Date Employed	From	То	
Reason for Leaving:			
(please be specific)	NAL SPACE CONTINUE ON SEPARA	ATE SHEET OF DADER	

IF YOU NEED ADDITIONAL SPACE CONTINUE ON SEPARATE SHEET OF PAPER.

CONDITIONS FOR EMPLOYMENT

Please read the following statements carefully as they constitute conditions for employment

- 1. The information that I have provided on this application is accurate and true to the best of my knowledge.
- 2. I understand that any misrepresentation or omission of a fact on my application, resume or during the interview or hiring process may result in the refusal of employment.
- 3. The persons, schools, current and prior employers (if approved by me in the Employment History Section), and other organizations or employers named in this application are authorized by me to verify the information I have provided and to provide additional information that maybe requested to arrive are an employment decision. I am willing that a photocopy of this authorization be accepted with the same authority as the original. I hereby waive and release all persons, schools, current and prior employers and other organizations from any liability arising from reliance on the aforementioned information or the use, publication, or retention of such information within the context of its applicant review procedures.
- 4. I will be able, if hired, to certify that I am authorized to work in the United States of America, and understand that in accordance with the Immigration Reform and Control Act that I will be required to provide timely documentation of identity and employment eligibility.
- 5. In the event that I am employed, I agree to conform to all company rules and regulations. I understand and agree that if I am employed, I shall be employed on an at-will basis. As an at-will employee, I understand and agree that either the company or I can terminate our employment relationship at any time for any reason, with or without advance notice and with or without cause. I understand and agree that, although over the course of my employment, other terms and conditions of my employment may change, the at-will term of my employment will not change. I understand that no one other than the Operations Manager or President of PYS may enter into any agreement with me contrary to the foregoing and that any such contrary agreement must be in writing and signed by either the Operations Manager or Company President.
- 6. Although the company makes every effort to accommodate individual preferences, business needs may make the following conditions necessary. Overtime, shift work, a rotating work schedule, or a work schedule that includes Saturday and/or Sunday. I understand and accept these as conditions of my employment.
- 7. I agree to protect confidential and proprietary information of the company, and the company's vendors, licensers, marketing partners or clients entrusted to the company, and I will not disclose to the company any confidential information.

Signature	Date
FOR PERSONNEL DEPARTMENT ON	NI Y

Interview Date Department	 Interviewer Job Title	
Hourly Rate/Salary	 Start Date	
NOTES:	 	

Yes

No

Arrange Interview