



Note: This application is valid for 90 days. If you wish to be considered for employment after this 90-day period, a new application must be completed.

100% Employee Owned

Non-Smoking Company Environment A Drug Screening Company An Equal Opportunity Employer*

PERSONAL INFORMATION

Date: _____

Name: _____ SS#: _____

Present Address: _____ Street City State Zip

Permanent Address: _____ Street City State Zip

Phone No: () _____ Are you 16 years or older? Yes ___ No ___

In order to permit a check of your work and education records, are there any other names that you have previously used? Yes No ___ If yes, identify names and relevant dates: _____

Please list all previous places of residence (if different than current residence) for the past three years (Use a separate sheet if more than three):

- 1. _____ How long? _____
2. _____ How long? _____
3. _____ How long? _____

GENERAL EMPLOYMENT QUESTIONS

How Did You Learn About Us? ___Advertisement ___Friend ___Walk-In ___Relative ___Employment Agency ___Other ___Von Tobel Corp. Employee (name: _____)

Position Applied For: _____ Can Start: _____

Are You Employed Now? _____ If So May We Contact Your Present Employer? ___ Previous Employers? ___ If "no," please explain reason: _____

Expected Wage \$ _____ per hour annually (circle one)

* Von Tobel Corporation is an equal opportunity employer and does not discriminate against applicants or employees in any phase of employment on the basis of age, race, color, gender, religion, national origin, ancestry, physical or mental disability, or any other classification protected by local, state, or federal law.

General Employment Questions Continued . . .

Ever Applied to
this Company Before? _____ If so, when? _____

Are you prevented from lawfully becoming employed in this country because of VISA or Immigration Status?
Yes _____ No _____ If "yes," please explain, and also note that proof of citizenship or immigration status will be required upon employment

Are you currently on "lay-off" status and subject to recall? _____ If "yes," please explain: _____

Type of employment desired: _____ Full-Time _____ Part-Time _____ Temporary

Driver's License Number
(if driving is an essential function of the job you are seeking) _____

Proof of Insurance (name of insurance company and policy number – if driving is an essential function of the job your are seeking) _____

If you are under the age of 18 can you furnish a work permit, if required? _____

<u>EDUCATION</u>	<u>Name and Location of School</u>	<u>No. of Years Attended</u>	<u>Did You Graduate?</u>	<u>Subjects Studied/Degree</u>
Elementary	_____	_____	_____	_____
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
Graduate/ Professional	_____	_____	_____	_____
Trade, Business or Other	_____	_____	_____	_____

Subjects of special study or work: _____

MILITARY SERVICE

Military Service: _____ Rank: _____ Present Membership in National Guard or Reserves: _____

FORMER EMPLOYERS Please give an accurate, complete full-time and part-time employment record. Include any job-related military service assignments and volunteer activities. Start with your current employer (or most recent employer if not employed) and account for all periods of unemployment. Use a separate sheet if necessary.

1.	EMPLOYER	DATES		WORK PERFORMED
	ADDRESS	FROM	TO	
	POSITION			
	SUPERVISOR	WAGE/SALARY		
	REASON FOR LEAVING	STARTING	FINAL	
	VOLUNTARY OR INVOLUNTARY TERMINATION?			
2.	EMPLOYER	DATES		WORK PERFORMED
	ADDRESS	FROM	TO	
	POSITION			
	SUPERVISOR	WAGE/SALARY		
	REASON FOR LEAVING	STARTING	FINAL	
	VOLUNTARY OR INVOLUNTARY TERMINATION?			
3.	EMPLOYER	DATES		WORK PERFORMED
	ADDRESS	FROM	TO	
	POSITION			
	SUPERVISOR	WAGE/SALARY		
	REASON FOR LEAVING	STARTING	FINAL	
	VOLUNTARY OR INVOLUNTARY TERMINATION?			
4.	EMPLOYER	DATES		WORK PERFORMED
	ADDRESS	FROM	TO	
	POSITION			
	SUPERVISOR	WAGE/SALARY		
	REASON FOR LEAVING	STARTING	FINAL	
	VOLUNTARY OR INVOLUNTARY TERMINATION?			

QUALIFICATIONS FOR EMPLOYMENT

Except for vacations and holidays, how many work days were you absent during the past calendar year?
__ 0-5 days __ 6-10 days __ 11-15 days __ 16-20 days __ 21+ days

Which of your previous jobs did you like best? _____

What did you like most about that job? _____

This Company has a policy of assuring that the work environment is free from harassment and discrimination. Have you ever been accused of sexual or other harassment or employment discrimination? Yes _____ No _____
If yes please explain: _____

What do you consider your greatest qualifications? _____

Describe any specialized training, apprenticeship, skills etc. (i.e. Forklift Operation, CDL Certification, Blue Print Reading/Estimating, Sales Training) and state where it was received. _____

List professional, trade, business or civic activities and offices held. (You may exclude membership which would reveal gender, race, religion, national origin, age, disability or any other protected status): _____

PERSONAL REFERENCES

(Give the names of three persons not related to you, whom you have known at least one year. Do not include any prior employer.)

	<u>Name</u>	<u>Address</u>	<u>Relationship</u>	<u>Years Acquainted</u>	<u>Telephone Number</u>
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____

OTHER

In case of
Emergency Notify: _____
Name Address Phone

Other Questions Continued . . .

Have you ever plead guilty or no contest to, or been convicted of any crime in any state? ___ Yes ___ No (If you are not applying for a position as a driver, do not include minor traffic offenses, but you should include all convictions classified as felonies, misdemeanors, and otherwise). If yes, please provide date, place, and nature of conviction. A conviction does not constitute an automatic bar to employment – the type of conviction and when it occurred will be considered.

Have you ever been involved in a "diversion" program in connection with any criminal matter, whether convicted or not? ___ Yes ___ No. (If yes, please provide details). _____

If hired, would you be able to perform all functions and all necessary job assignments of the particular job for which you are applying? Yes ___ No ___ If "No," please explain: _____

CERTIFICATION

I expressly authorize, without reservation, the Company, its representatives, employees or agents to contact and obtain information, and I agree to cooperate in obtaining such information, from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume and interview. I specifically authorize the Company to obtain a criminal history regarding me for pre-employment purposes, and if employed, at any time during employment for legitimate business purposes. I hereby waive any and all rights and claims I may have against the Company, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me. In addition, I authorize any party having information bearing upon my qualifications for employment to release such information to the Company. I release from any and all liability all individuals and organizations who provide information to the Company concerning my employment, competence, ethics, character and other qualifications, including privileged or confidential information.

I agree to submit to any lawful drug, alcohol, or other testing that may be required as a condition of employment or continued employment and understand that refusal to promptly submit and cooperate with such testing prior to or during the course of my employment will result in disqualification from consideration for employment or, if hired, termination.

I fully understand that if employed, any misrepresentation or omission on this Application or any other Company record will result in dismissal, regardless of the date of discovery. I acknowledge that employment is also subject to a satisfactory review of my references.

Neither this Application nor any statement made to me during the hiring process or thereafter shall be considered a contract of employment of any kind. Where such a contract is intended, I understand that it will be separately entered into and signed by the President of the Company. Absent such a contract, I understand that, if hired, my employment will be terminable-at-will, with or without reason, cause or notice, that I am not being employed for any specified or definite period of time, and that this application is not and is not intended to be a contract, offer, statement or confirmation of or for continued employment. I understand that any employee handbook or manual does not represent an employment contract if I am hired. The Company may alter, modify, amend, or terminate any of its policies and benefits, both as to active and retired employees.

Date

Signature

NOTICE, AUTHORIZATION, AND RELEASE REGARDING CREDIT AND CONSUMER REPORT INVESTIGATION

I have applied for employment with Von Tobel Corporation or one of its affiliates ("Company"). I understand that the Company may obtain a credit and/or consumer report about me in order to determine whether I have a satisfactory credit history and to obtain other information about me in order to assist it in making a decision about my application for employment. I authorize the Company to obtain a consumer report (and I understand that a credit report is a type of "consumer report") for employment purposes, and if employed, at any time during employment for legitimate business purposes, such as in connection with decisions relating to my retention, promotion, or transfer. I also understand that the above-referenced information may be obtained by the Company from a consumer reporting agency (hereinafter "agency"), and will be evaluated with other information obtained during the screening and interviewing process in connection with any hiring decision, or in connection with the decision to retain, promote, or transfer me if I am hired. The consumer report will not be used for any other purpose.

If, after reviewing the consumer report, the Company intends to make a decision not to hire me (or not to retain, promote, or transfer me), based in whole or in part on information contained in that report, the Company shall: (1) provide notice of such intent to me; and (2) with such notice, provide me with a copy of the report the Company obtained, along with a written description of my rights, as prescribed by the Federal Trade Commission under Section 1681g(c)(3) of the Fair Credit Reporting Act (hereinafter "Act").

If the Company then decides not to hire me (or not to retain, promote, or transfer me), based in whole or in part on information contained in the consumer report, the Company will: (1) provide notice of such action to me; (2) provide me with the name, address, and telephone number of the agency (including any toll-free number established by the agency) that provided the report to the Company; (3) provide me with a statement that the agency did not make the decision not to hire me (or to retain, promote, or transfer me if I am employed), and that the agency is unable to provide me the specific reasons as to why the Company's decision was made; and (4) provide me with notice of my right to request and obtain, pursuant to section 1681j of the Act, a free copy of the report from the agency and to make a request for such report within 60 days of my receipt of notice from the Company informing me of its decision not to hire (retain, promote, or transfer) me, and additional notice that I may dispute with the agency the accuracy or completeness of any information in the consumer report, pursuant to Section 1681i of the Act.

I have read and understand the above, and I understand my rights. I authorize the Company to obtain a consumer report from a consumer reporting agency regarding me. In addition, I release the Company, its agents, and employees from any liability in connection with their use of the report or their reliance thereon in connection with any decision made by them. I understand that the investigative background inquiries that may be made about me may include my criminal, driving, consumer, and other records. These records may also include information as to my character, work habits, performance, and experience along with reasons for termination of past employment. I understand that this report may also include information obtained from various government agencies which maintain records relating to criminal, driving, credit, civil, and other experiences, as well as claims involving me in the files of insurance companies. I authorize, without reservation, any party or agency contacted by the Company any consumer reporting agency used by the Company to furnish the above-mentioned information, and release them from any and all liability in connection with such disclosure.

Please Print:

Last Name (Maiden Name) First Name M.I.

Address

City State Zip

Social Security # Phone #

Applicant Signature Date

DO NOT WRITE BELOW THIS LINE

Interviewed By: _____ Date: _____

Hire: Yes _____ No _____ Position: _____

Department: _____ Salary/Wage: _____

Date Reporting to Work: _____

Approved: 1. _____ 2. _____ 3. _____