

PREMISE ONE, INC.
AN EQUAL OPPORTUNITY EMPLOYER
APPLICATION FOR EMPLOYMENT
PLEASE READ CAREFULLY

WARNING:
(1) All questions must be answered.
(2) Non-responsive information will disqualify applicant from consideration.

APPLICATIONS ARE CURRENT FOR THIRTY (30) DAYS. IF YOU ARE NOT HIRED BUT ARE STILL INTERESTED IN A POSITION AFTER THIRTY-DAYS, A NEW APPLICATION MUST BE FILED.

NAME _____
(First) (Middle) (Last) (Date)

ADDRESS: _____
(Number) (Street) (Telephone Number)

_____ (City) (State) (Zip Code) (Social Security Number)

IN CASE OF EMERGENCY, NOTIFY _____
(Name) (Address) (Phone Number)

Position Applied For _____ Expected Wage _____

Are you 18 years of age or older? _____

Have you ever been employed or have applied here before? _____ If yes, give date _____

On what date would you be available to work? _____

Are you available for work: Full-time _____ Part-time _____ Temporary _____

Will you work nights? _____ Will you work overtime? _____ Will you work weekends? _____

If hired, can you provide proof that you are legally able to work in the United States? _____

If any limitations to availability, please explain _____

Do you have dependable transportation? _____ If YES, what kind? _____

Do you have a valid driver's license? _____ Driver's License No., State and Type _____

Have you been convicted of a felony within the last 7 years (Conviction will not necessarily disqualify you from employment)? _____ If YES, please explain: _____

List any special skills you possess that you believe to be relevant to the position sought: _____

EMPLOYMENT HISTORY (Account for last 7 years)
See next page for additional space if needed

**MUST BE COMPLETED
IN FULL**

Current or Last Employer	May we contact? _____
Address of Employer	Telephone Number ()
Immediate Supervisor	Current Tel. # of Supervisor
Date Employed From / / To / /	Salary
Reason for Leaving	

Next Previous Employer	May we contact? _____
Address of Employer	Telephone Number ()
Immediate Supervisor	Current Tel. # of Supervisor
Date Employed From / / To / /	Salary
Reason for Leaving	

Next Previous Employer	May we contact? _____
Address of Employer	Telephone Number ()
Immediate Supervisor	Current Tel. # of Supervisor
Date Employed From / / To / /	Salary
Reason for Leaving	

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E M P L O Y M E N T H I S T O R Y	List any additional experience, skills or qualifications that you believe would assist you in your employment.
	Are you able to perform the duties of the position you seek with or without an accommodation? <input type="checkbox"/> YES <input type="checkbox"/> NO
	Please describe what type of accommodation, if any, you may need: _____
	Do you have relatives or friends employed here? <input type="checkbox"/> YES <input type="checkbox"/> NO
	Name/Relationship: _____
	Are you willing to use your vehicle for work/business purposes? <input type="checkbox"/> YES <input type="checkbox"/> NO
	Based on your opinion of yourself and your previous employment, what kind of employee will you be regarding: (the employer will rely on your representations)
	Attendance
	Responsibility
	Attitude
Conscientiousness	

E D U C A T I O N	TYPE	NAME AND LOCATION OF SCHOOL	COURSE OF STUDY	NO. OF YEARS COMPLETED	DID YOU GRADUATE?	DEGREE OR DIPLOMA
	HIGH SCHOOL	Name of School			<input type="checkbox"/> YES <input type="checkbox"/> NO	
		Location				
	COLLEGE	Name of School			<input type="checkbox"/> YES <input type="checkbox"/> NO YEAR ____	
		Location				
	GRADUATE SCHOOL	Name of School			<input type="checkbox"/> YES <input type="checkbox"/> NO YEAR ____	
		Location				
	OTHER	Name of School			<input type="checkbox"/> YES <input type="checkbox"/> NO YEAR ____	
		Location				

R E F E R E N C E S	PLEASE LIST 3 BUSINESS REFERENCES (THOSE WHO KNOW AND CAN COMMENT ON YOUR WORK EXPERIENCE)				
	NAME	COMPANY	ADDRESS	ZIP	AREA CODE/PHONE
	NAME	COMPANY	ADDRESS	ZIP	AREA CODE/PHONE
	NAME	COMPANY	ADDRESS	ZIP	AREA CODE/PHONE

APPLICANT'S STATEMENT

1. All information given by me in this application is true and correct. False information (misrepresentation or omission of information called for) is a basis for dismissal. Not answering questions, or not providing the requested information, or presenting non-responsive information will disqualify the applicant for employment. I authorize investigation of all information contained herein and specifically authorize the employers, schools and organizations named in this application to give you any and all information concerning me and, by doing so, release all persons from any liability for any damage that may result from providing the information.

2. In consideration for my employment, I agree to conform to the Company's policies, practices, rules/regulations and standards, which may be changed from time to time. I further agree that my employment (and the terms and benefits provided to me) is not intended to and does not constitute any contractual relationship, will be for no definite period of time, and is terminable by myself or the Company with or without notice or cause. No oral statements or representations made either before or during employment can change or modify this non-contractual and at-will relationship.

3. In further consideration for my employment, I understand and agree that there are other forms, statements, and provisions that have to be completed and agreed to, and those forms, statements and provisions are part of this application and will be included with my employment records.

(Signature of Applicant)

Date)

FOR EMPLOYER'S USE ONLY

R E F E R E N C E & I N T E R V I E W R E S U L T S	Interviewer Name and Comments