

CLIFF HANGERS APPLICATION FOR EMPLOYMENT

(Please Print)

Note: This application was designed for use with several types of positions.
Please answer all questions. Resumes are not accepted in lieu of completion of this application.

Position Applied For _____ Date _____

Name _____
Last First Middle

Present Address _____
Number/Street City/State Zip

Home Telephone (____) _____ Work Telephone (____) _____

Cellular Telephone (____) _____ Email Address _____

Only U.S. Citizens or aliens who have a legal right to work in the U.S. are eligible for employment.
Are you legally eligible to work in the U.S.A.? ____Yes ____No If yes, verification will be required.

If you are under 18 years of age, can you provide required proof of your eligibility to work? ____Yes ____No

Do you have transportation to work? ____ Yes ____ No

Will you work overtime if asked? ____ Yes ____ No

Are there any hours or days you will not work? ____Yes ____No

If yes, explain _____

Can you travel if required by the job? ____ Yes ____ No

On what date would you be available for work? _____

Are you currently employed? ____ Yes ____ No

May we contact: Your present Employer? ____ Yes ____ No Your Previous Employers? ____ Yes ____ No

Please identify any exceptions and reasons for not contacting previous employers. _____

Have you ever plead guilty to, no contest to, or been convicted of a crime or traffic violation? ____ Yes ____ No
This includes non-felony convictions and traffic violations. If you have any questions regarding this, contact Human Resources.
If yes, give dates and explain. Attach a separate sheet of paper if necessary. A conviction will not necessarily disqualify you from employment.

Have you filed an application with us before? ____ Yes ____ No If yes, give date _____

Have you ever been employed with us before? ____ Yes ____ No If yes, give dates _____

Do you have any friends or relatives who work for us? ____ Yes ____ No

Name _____ Relationship _____

Name _____ Relationship _____

EDUCATION

SCHOOL	LIST NAME AND ADDRESS OF SCHOOL	YEARS COMPLETED	DIPLOMA OR DEGREE	MAJOR COURSE OF STUDY
High School				
College				
Graduate/ Professional				
Other				

List any honors received, specialized skills, training, and/or experience that support your application.

In order for the Company to check your work and educational records, should we be aware of any change of name or assumed names that you previously used? ___ Yes ___ No If Yes, identify names and relevant dates.

PROFESSIONAL REFERENCES

List three current or previous supervisors, not related to you, whom we have your permission to contact for references.

NAME

TITLE

COMPANY

PHONE

EMAIL ADDRESS

EMPLOYMENT

List current/most recent job first. Account for all time periods including unemployment, self-employment, and military service. If you need additional space, please continue on a separate sheet of paper.

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EMPLOYER	TELEPHONE	DATES EMPLOYED		BRIEF DESCRIPTION OF YOUR JOB
		FROM	TO	
ADDRESS				
JOB TITLE	HOURLY RATE/SALARY			
	STARTING	FINAL		
SUPERVISOR				
REASON FOR LEAVING				

2

EMPLOYER	TELEPHONE	DATES EMPLOYED		BRIEF DESCRIPTION OF YOUR JOB
		FROM	TO	
ADDRESS				
JOB TITLE	HOURLY RATE/SALARY			
	STARTING	FINAL		
SUPERVISOR				
REASON FOR LEAVING				

3

EMPLOYER	TELEPHONE	DATES EMPLOYED		BRIEF DESCRIPTION OF YOUR JOB
		FROM	TO	
ADDRESS				
JOB TITLE	HOURLY RATE/SALARY			
	STARTING	FINAL		
SUPERVISOR				
REASON FOR LEAVING				

4

EMPLOYER	TELEPHONE	DATES EMPLOYED		BRIEF DESCRIPTION OF YOUR JOB
		FROM	TO	
ADDRESS				
JOB TITLE	HOURLY RATE/SALARY			
	STARTING	FINAL		
SUPERVISOR				
REASON FOR LEAVING				

Please explain any gaps in your employment history. _____

List any other information or remarks that you wish to have considered as a part of your application for employment.

NOTICE TO APPLICANTS

During the interview process, you will be asked questions concerning your ability to perform job-related functions.

The Company is an equal opportunity employer and considers applications for all positions without regard to race, color, age, sex, religion, national origin, disability or marital status.

This application will remain active for one-hundred eighty (180) days. Any applicant wishing to be considered for employment beyond one-hundred eighty (180) days must reapply.

APPLICANT'S STATEMENT

I certify that the foregoing answers are true and correct to the best of my knowledge. I authorize the investigation of all statements contained in this application and hereby give this permission to contact schools, previous employers, references, and others, and hereby release the Company from any liability as a result of such contact. *I specifically authorize the procurement of a consumer report by the Company as a part of the pre-employment background investigation. If hired, this authorization shall remain on file and shall serve as an ongoing authorization for the Company to procure consumer reports at any time during my employment period.* I understand that any false or misleading information or omissions of facts requested in this application or interview may remove me from further consideration for employment. In addition, if employed, any false or misleading statement or omission of fact called for in this application may be cause for subsequent dismissal at any time without any previous notice.

I understand that my employment with the Company is at-will and for no specific term and I may resign or be discharged with or without notice or cause at any time. I further understand that no oral promise, Company policy, custom, business practice *or* other procedure (including the Company's employee handbook or any personnel manuals) will change the employment at-will relationship between the Company and me.

The contents of any employee handbook or personnel manuals, as well as other Company policies or practices, are subject to change or modification by the Company, solely at its discretion, without notice. I also understand that no supervisor or other official of the Company (except an authorized Executive, in writing) has the authority to enter into any agreement with me or to make any agreement contrary to the above.

I understand that the Company may require applicants for employment to be subject to a criminal background check and/or to undergo screening for illegal drug use as part of a pre-placement physical examination. In addition, all employees are subject to tests or screening for drug or alcohol use under appropriate circumstances.

Signature _____ Date _____

PRE-EMPLOYMENT INQUIRY RELEASE

During the course of my employment (including contract for services) with you, I understand that investigative background inquiries are to be made on myself including consumer, criminal, driving and other reports. These reports will include information as to my character, work habits, performance and experience along with reasons for termination of past employment from previous employers. Further I understand that you will be requesting information from various federal, state and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil and other experiences as well as claims involving me in the files of insurance companies. *If an investigative consumer report, containing information about your character, general reputation, personal characteristics and mode of living is requested, you have the right to demand a complete and accurate disclosure of the nature and scope of the investigation requested and a written summary of your rights under the Fair Credit Reporting Act.*

I authorize, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information:

PRINT FULL NAME: _____

SOCIAL SECURITY NUMBER: _____

DATE OF BIRTH: _____
Month / Day / Year

CURRENT ADDRESS: _____

DRIVER'S LICENSE NUMBER: _____

STATE: _____

APPLICANT'S SIGNATURE: _____

PROSPECTIVE EMPLOYER: _____

TODAY'S DATE: _____

_____ New York Applicants Only: Please check here to be informed if and when the Company requests that Acxiom/Trans Union prepare a report on you and to be given contact information for Acxiom/Trans Union.

_____ California Applicants Only: Please check here to have a copy of your consumer credit report sent directly to you by Acxiom/Trans Union, the preparer of the report, at the address you listed above.