

APPLICATION FOR EMPLOYMENT **PRE-EMPLOYMENT QUESTIONNAIRE** **EQUAL OPPORTUNITY EMPLOYER**

PERSONAL INFORMATION

DATE _____

NAME (LAST NAME FIRST)		SOCIAL SECURITY NO.	
PRESENT ADDRESS	CITY	STATE	ZIP CODE
PERMANENT ADDRESS	CITY	STATE	ZIP CODE
PHONE NO. ()	REFERRED BY		

EMPLOYMENT DESIRED

POSITION	DATE YOU CAN START	SALARY DESIRED
ARE YOU EMPLOYED NOW? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO	ARE YOU LEGALLY AUTHORIZED TO WORK IN THE US? <input type="checkbox"/> YES <input type="checkbox"/> NO
EVER APPLIED TO THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO	WHERE?	WHEN?

EDUCATION HISTORY

	NAME & LOCATION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

GENERAL INFORMATION

SUBJECTS OF SPECIAL STUDY/RESEARCH WORK	
SPECIAL TRAINING	
SPECIAL SKILLS	
U.S. MILITARY OR NAVAL SERVICE	RANK

FORMER EMPLOYERS (LIST BELOW LAST FOUR EMPLOYERS, STARTING WITH LAST ONE FIRST)

DATE MONTH AND YEAR	NAME & ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

REFERENCES GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS	BUSINESS	YEARS KNOWN

AUTHORIZATION

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws."

DATE _____ SIGNATURE _____

DO NOT WRITE BELOW THIS LINE

INTERVIEWED BY _____ DATE _____

REMARKS

NEATNESS		CHARACTER		
PERSONALITY		ABILITY		
HIRED	FOR DEPT.	POSITION	WILL REPORT	SALARY WAGES

APPROVED: 1. _____ 2. _____ 3. _____
EMPLOYMENT MANAGER DEPARTMENT HEAD GENERAL MANAGER

This application for employment is sold only for general use throughout the United States. Adams assumes no responsibility and hereby disclaims any liability for the inclusion in this form of any questions or requests for information upon which a violation of local, state, and/or federal law may be based. It is the user's responsibility to ensure that this form's use complies with applicable laws, which change from time to time.

BACKGROUND AND REFERENCE INVESTIGATION AUTHORIZATION AND RELEASE/DISCLOSURE FOR EMPLOYMENT PURPOSES

As part of its employment screening and selection procedures, _____ (hereafter referred to as "Company") requires that a background investigation and a check of references be conducted. The objectives of the investigation are to verify information provided during the application process, investigate references and identify any factors that might be inconsistent with Company employment requirements.

I, _____, (applicant's name) give Company and/or Research, Inc. permission and authority to conduct a background investigation and reference check into my past and current activities. I understand and consent to an investigation that may include, but is not limited to, information as to my personal character, general reputation, verification of previous employment and employment references, verification of education, credit history, motor vehicle driving record, social security wage information, criminal records and other information contained in public records.

I authorize and request any Former Employers, Schools, Police Departments, States, Cities and Counties, or any other Person to furnish Company and/or Research, Inc. designees information concerning:

- | | | |
|-------------------------|--------------------|-------------------|
| My Work Habits | Character | Criminal Record |
| Reasons for Termination | Reputation | Driving Record |
| Salary History | Worker Comp Claims | Education History |
| | | Credit History |

and all other relevant information requested by Company.

I hereby release all Persons, Companies, Corporations, Schools, or Individuals from all liability and responsibility that may result from providing Company and/or Research, Inc. with such information as requested.

I understand that if hired, my employment is for no definite period of time, consistent with state law, and may be terminated with or without cause and with or without notice, at any time, at the option of either Company or myself. No employee, representative, manager, official or supervisor of Company, other than the president or any vice president of Company, has any authority to enter into any agreement for employment for a specified period of time or make any agreement relative to employment that is contrary to the foregoing. Any such employment agreement will be in writing, signed by the designated officer and clearly specifying its term.

If I am not hired due to information contained in the background screen report, I will be notified in writing and a copy of the said report will be supplied to me with a written summary of my rights under the Fair Credit Reporting Act of 1970 as amended in 1996.

Applicant	Social Security Number
Current Street Address	City * State * Zip Code
Driver's License Number	Date of Birth
Issuing State	
Signature	Date

PLEASE NOTE: The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age.

RI clients are granted permission to make additional copies of this form.