

APPLICATION FOR EMPLOYMENT

INSTRUCTIONS: Please use an ink pen to complete the application in your own handwriting

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, disability, national origin, veteran status or any other characteristic protected under the law.

This application shall be considered active for a period not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should complete another application at the end of that period.

Name (Last, First, Middle)		Date of Application
If there is any other name other than the one stated above that would identify you to a previous employer or educational institution, please list.		
Address (Street, City, State, Zip)		Telephone Number with Area Code
E-mail Address		Mobile/Beeper/Other Telephone Number
Position Applying for		
Date Available	Salary Requirements	Social Security Number
Referred by: <input type="checkbox"/> Agency _____ <input type="checkbox"/> Walk-in <input type="checkbox"/> Newspaper <input type="checkbox"/> Internet <input type="checkbox"/> Friend _____ <input type="checkbox"/> Other (Check one)		

<i>Please Check Yes Or No:</i>	Yes	No
Have you ever filed an application with us before? If yes, give date: _____	<input type="checkbox"/>	<input type="checkbox"/>
If you are under 18 years of age, can you provide required proof of your eligibility to work?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been employed with us before? If yes, when and where? _____	<input type="checkbox"/>	<input type="checkbox"/>
Are you currently employed?	<input type="checkbox"/>	<input type="checkbox"/>
Are you currently on "lay-off" status and subject to recall?	<input type="checkbox"/>	<input type="checkbox"/>
Can you travel if a job requires it?	<input type="checkbox"/>	<input type="checkbox"/>
If applicable, are you willing to relocate?	<input type="checkbox"/>	<input type="checkbox"/>
Are any relatives or acquaintances employed with us? If yes, list: _____	<input type="checkbox"/>	<input type="checkbox"/>
Are you able to meet the attendance requirements of the job?	<input type="checkbox"/>	<input type="checkbox"/>
Have you signed any non-competition or non-disclosure agreements for any prior employers?	<input type="checkbox"/>	<input type="checkbox"/>
Have you ever been discharged or been asked to resign from a job?	<input type="checkbox"/>	<input type="checkbox"/>
If so, please explain: _____		
Have you been convicted of a felony or misdemeanor within the last seven years?	<input type="checkbox"/>	<input type="checkbox"/>
If yes, please provide dates and details: _____		
<i>Note: A conviction record is not an automatic bar to employment. Each case is considered in relation to the position applied for.</i>		
Are you available to work:	<input type="radio"/> Full Time <input type="radio"/> Part Time <input type="radio"/> Overtime <input type="radio"/> Temporary	If Applicable: <input type="radio"/> Shift Work Shift Preference <input type="radio"/> 1st <input type="radio"/> 2nd <input type="radio"/> 3 rd

WORK EXPERIENCE (MOST RECENT)

Name of Employer	Address of Employer	Date Employed From: To:
Telephone of Employer	Supervisor's Name and Title	Rate of Pay Start: Finish:
Position or Title	Description of Duties	
Reason for Leaving		May we contact this employer for verification? <input type="checkbox"/> Yes <input type="checkbox"/> No

PREVIOUS EMPLOYER

Name of Employer	Address of Employer	Date Employed From: To:
Telephone of Employer	Supervisor's Name and Title	Rate of Pay Start: Finish:
Position or Title	Description of Duties	
Reason for Leaving		May we contact this employer for verification? <input type="checkbox"/> Yes <input type="checkbox"/> No

NEXT PREVIOUS EMPLOYER

Name of Employer	Address of Employer	Date Employed From: To:
Telephone of Employer	Supervisor's Name and Title	Rate of Pay Start: Finish:
Position or Title	Description of Duties	
Reason for Leaving		May we contact this employer for verification? <input type="checkbox"/> Yes <input type="checkbox"/> No

NEXT PREVIOUS EMPLOYER

Name of Employer	Address of Employer	Date Employed From: To:
Telephone of Employer	Supervisor's Name and Title	Rate of Pay Start: Finish:
Position or Title	Description of Duties	
Reason for Leaving		May we contact this employer for verification? <input type="checkbox"/> Yes <input type="checkbox"/> No

INTERVALS OF UNEMPLOYMENT

From	To	Explanation
From	To	Explanation
From	To	Explanation

EDUCATIONAL HISTORY

Name	Location	Course of Study	Graduate	Degree Received
High School/GED			Yes or No	
College				
Other				

BUSINESS REFERENCES

Name	Company	Address	Telephone Number
Name	Company	Address	Telephone Number
Name	Company	Address	Telephone Number

MILITARY HISTORY

US Military Service	Branch of Service	Duties
From: To:	Rank at Discharge	Reserve Status

SKILLS AND QUALIFICATIONS

Summarize any training skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

APPLICANT'S STATEMENT

1. I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application or in any interview is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by Anderson Global. Please note that all information is subject to verification.
2. I understand that a background check is a condition of employment. I authorize Anderson Global and/or its agents to investigate thoroughly all statements contained in my application or resume, and to conduct a thorough investigation of my personal and professional experience and background; including without limitation, a review of my criminal, credit, employment and all other records Anderson Global deems appropriate under the circumstances, and I authorize former employers and references to disclose any and all information in their possession regarding me in connection with an application for or retention of employment to the Company and/or its agent. In addition, I release the Company and/or its agents, any former employers and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation.
3. *I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at-will" and without fixed term, and may be terminated at any time, with or without prior notice, at the option of either the Company or myself. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Company unless made in writing by an authorized company official.*
4. If I am offered employment I agree to submit to a medical examination and/or drug test before starting work. If employed, I also agree to submit to a medical examination and/or drug test at any time deemed appropriately by the Company and as permitted by applicable law. I consent to such examinations and/or tests, and I request that the examining doctor disclose to the Company the results of the examination, which the Company shall keep confidential. I understand that my employment or continued employment, to the extent permitted by applicable law, is contingent upon satisfactory medical examinations and/or drug test.
5. I understand that employment is contingent upon my complying with the employment verification requirements of the Immigration Reform and Control Act.
6. I understand that Anderson Global does not unlawfully discriminate in employment and no questions on this application are to be used for the purpose of limiting or excluding any applicant from consideration of employment on a basis prohibited by applicable local, state or federal law.
7. I certify that I have read, or have had read to me, items, 1, 2, 3, 4, 5 and 6 above. I understand the contents and hereby acknowledge receipt of this information.

APPLICATION IS NOT COMPLETE WITHOUT SIGNATURE.

Signature of Applicant

Date

We appreciate your interest and the time you have taken to complete this application. Thank You.

Email applications to: hr@andersonglobal.com

*Equal Employment Opportunity and
Drug-Free Workplace Employer*