



EMPLOYMENT APPLICATION

Employer is an equal opportunity employer and does not discriminate on the basis of race, religion, color, national origin, age, sex, gender, disability or any other characteristic protected by law.

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Date Available	Social Security No.	Desired Salary	
Position Applied for			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE

Please read each of the following statements carefully and affirm that you understand and consent to each by signing at the bottom of the page.

False Information: False answers or omissions to questions or false statements or omissions made on this application, in your resume, in any interview or in supplement thereto, may invalidate your application or, if you are hired, may be grounds for discharge from employment.

"At Will" Employment: Please note that if hired by Payne's Parking Design (The Employer) your employment and compensation can be terminated at anytime, with or without cause, and with or without notice, at the option of the Employer or yourself.

Handbook, Manuals, Policies, Procedures, Benefits: The Employer may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any policy, procedure, practice, condition, benefit, or process affecting employees. Descriptions of these that may be contained in any handbook, manual, policy, and the like are for informational purposes and are not intended to be, nor should they be construed to constitute an employment contract, an offer of initial or continuing employment or a guarantee made by The Employer.

Immigration Reform and Control Act (IRCA): Due to the Immigration and Control Act of 1986, which was signed into Federal Law on November 6, 1986, all employees hired must present documents to establish identity and authorization to work in the United States. If hired, a U.S. Department of Justice Form I-9 must be filled out when employment commences.

Information and Release Authorization: I voluntarily give (The Employer), or its authorized agent the right to make any investigation of my background deemed necessary by them including, but not limited to, my present and former employment, my educational background, and my personal and professional references. I hereby authorize those persons or institutions contacted by The Employer or its agents to provide the information requested.

I voluntarily and knowingly unconditionally release any named or unnamed informant from any and all liability resulting from the furnishing of this information.

Entering your name below and returning this draft in full, constitutes an electronic signature of this Agreement, which is enforceable by law. A photographic or faxed copy of this Information & Release Form shall be as valid as the original.

Signature

Date