



An Equal Opportunity Employer & Drug-Free Workplace

Application for Employment

RVS 1_2020

Equal Access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodations to complete the application and/or interview process should notify a representative of the Human Resources Department.

We are an equal opportunity employer. Applicants are considered for positions without regard to veteran status, uniformed service member status, race, color, religion, sex, national origin, age, physical or mental disability, genetic information, pregnancy, citizenship status or any other category protected by applicable federal, state, or local laws.

The Company is an at will employer where allowed by applicable state law; this means that regardless of any provision in this application, if hired, the Company or applicant, may terminate the employment relationship at any time, for any lawful reason, with or without cause or notice. This application does not create any type of express or implied contract.

NOTICE TO APPLICANTS: SCREENING TESTS FOR ILLEGAL DRUG USE WILL BE REQUIRED AS A CONDITION OF EMPLOYMENT.

Please Answer All Questions. Resumes Are Not A Substitute For A Completed Application.

Date of Application: _____

Desired position(s): _____

Referral Source Advertisement Employee Relative Gov't Employment Agency
 Walk-in Private Employment Agency Other

Name of Source (if applicable): _____

Name: _____

Current Street, City and State Address: _____

Home Telephone Number: _____ Mobile/Other: _____

Email address: _____

Best time to call you at home: _____ AM PM

May we contact you at work? Yes No If yes, work number: _____

Best time to call you at work: _____ AM PM

If you are under 18 and it is required, can you furnish a work permit? Yes No

If no, please explain _____

If hired, are you able to provide documentation that you are authorized to work in the United States? Yes No

If not, what steps must be taken for you to begin employment lawfully? _____

Have you submitted an application here before? Yes No

If yes, give dates and positions _____

Have you been employed by Ioxus before? Yes No

If yes, give dates: From: _____ To: _____ Reason for separation: _____

Type of employment desired: Full Time Part-Time Temporary

Are you willing to work overtime if necessary? Yes No

Date available to begin employment: _____

Desired salary range: _____

Do you have any commitments to any other employer which could affect your employment with this Company if hired (for example, an employment agreement, a non-competition or non-solicitation agreement, etc.)? Yes No

Have you ever been bonded? Yes No

Do you have a valid driver's license? Yes No

Educational Background

Please complete the table below requesting details of your education.

Education Level	School Name and Address	Course of Study or Major	Graduate (Yes or No)	Number of Years Completed	Honors Received
High School					
College					
Graduate/Professional					
Trade					
Other					

Employment History

Please list the names of your present and/or previous employers in chronological order with present or most recent employer listed first. Provide information for at least the most recent ten (10) year period. Attach additional sheets if needed. If self-employed, provide firm name and business references. You may include any verifiable work performed on a volunteer basis, internships, or military service. Your failure to completely respond to each inquiry may disqualify you for consideration from employment. Please do not answer "see resume."

Employer Name:		Currently Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Employer Telephone Number: ()	Dates Employed: From	To:	
Employer State, City & State Address:			
Starting Job Title:	Supervisor Name, Title & Phone Number:		
Final Job Title:	Supervisor Name, Title & Phone Number:		
Summarize Work Performed and Responsibilities:			
Reason for Leaving:			
May We Contact for Reference? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER			
If No, please provide explanation:			

Employer Name:		Currently Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Employer Telephone Number: ()	Dates Employed: From	To:	
Employer State, City & State Address:			
Starting Job Title:	Supervisor Name, Title & Phone Number:		
Final Job Title:	Supervisor Name, Title & Phone Number:		
Summarize Work Performed and Responsibilities:			
Reason for Leaving:			
May We Contact for Reference? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER			
If No, please provide explanation:			

Employer Name:		Currently Employed: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Employer Telephone Number: ()	Dates Employed: From	To:	
Employer State, City & State Address:			
Starting Job Title:	Supervisor Name, Title & Phone Number:		
Final Job Title:	Supervisor Name, Title & Phone Number:		
Summarize Work Performed and Responsibilities:			
Reason for Leaving:			
May We Contact for Reference? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER			
If No, please provide explanation:			

Please explain any gaps in employment history.

Have you ever been terminated or asked to resign? Yes No

Have you ever been given the choice to resign rather than be terminated? Yes No

If you answered Yes to either of the questions above, please explain the circumstances of each occurrence.

Skills and Qualifications

Briefly describe your qualifications and summarize any special 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.

List any professional or occupational registrations, licensure or certifications you currently hold which may be applicable to the position for which you are applying and/or indicate whether you have ever had any related professional registration, license or certification suspended, revoked or terminated:

References

Please complete the table below requesting **additional business/work references** (not listed above or relatives) that have worked with you. Individuals without work experience may list school or volunteer references.

Name	Position	Company	Work Relationship (co-worker, non-direct supervisor, owner)	Telephone Number	Number of Years
				()	
				()	
				()	

Please complete the table below requesting **personal references** (not previous employers or relatives) that we may contact.

Name	Occupation	Relationship	Telephone Number	Number of Years
			()	
			()	
			()	

Additional Information

List professional, trade, business or civic associations and any offices held. Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status.

Organization	Offices Held

List special accomplishments, publications, awards, etc.; exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status.

Provide any additional information you would like us to consider.

Applicant Certification

I understand that the Company has a drug-free workplace of drug and/or alcohol testing program consistent with applicable federal, state, and local law. If I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) unlawful drug and/or alcohol test is positive, the employment offer may be withdrawn where allowed by law. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or illegal or controlled drugs. If employed, I understand that alcohol and/or drug testing may be a condition of continual employment and I agree to undergo alcohol and drug testing consistent with the Company's policies and applicable federal, state, and local laws.

If employed by the Company, I understand and agree that the Company, to the extent permitted by federal, state, and local law, I will be required to sign a confidentiality, restrictive covenant, and/or conflict of interest statement.

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

If hired, I agree to conform to the lawful rules and regulations of the Company, and I understand the Company has complete discretion to modify such rules and regulations at any time.

If employed by the Company, I understand and agree that the Company, to the extent permitted by federal, state and local law, may exercise its right, without prior warning or notice, to conduct investigations of Company property (including, but not limited to files, lockers, desks, vehicles, phones and computers) and in certain circumstances, my personal property. I understand that I have no expectation of privacy in Company property.

I certify that all the information on this application, my resume, or any supporting documents I may present during any interview is and will be complete and accurate, to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

I authorize the Company and/or its agents to confirm all statements contained in this application and/or resume as it relates to the position I am seeking, to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for background investigations which may be permitted by federal, state, and/or local law.

I authorize and consent to, without reservation, any party or agency contacted by this employer (including any and all prior employers of mine) to furnish information regarding my previous employment history and/or any of the above-mentioned information. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to the Company or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the Company and its representative for seeking such information and all other persons, corporations, or organizations furnishing such information. Further, if hired, I authorize the Company to provide truthful information concerning my employment to future employers and hold the Company harmless for providing such information.

If hired by this Company, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this Company. I also understand this Company employs only individuals who are legally eligible to work in the United States.

This application will be considered active for a maximum of sixty (60) days. If you wish to be considered for employment after that time, you must reapply.

DO NOT SIGN UNTIL YOU HAVE READ ALL OF THE INFORMATION CONTAINED IN THE APPLICATION.

I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE, ACCURATE, AND COMPLETE. I ACCEPT ALL THE TERMS OF THE FOREGOING APPLICANT STATEMENT.

Applicant Signature: _____ **Date:** _____