



APPLICATION FOR EMPLOYMENT

Fill out form completely

We consider applicants for all positions without regard to race, color, religion, creed, gender, National origin, age, disability, marital or veteran status, or any other legally protected status.

**** TO ENSURE FULL CONSIDERATION, YOU MUST FILL OUT THE APPLICATION COMPLETELY. ****

(PLEASE PRINT)

| | | | | | | |
|----------------------------------------|---------------------------------|-----------------------------------|----------------------------------|-----------------------------------|--------------------------------------|---------------------------|
| Position(s) Applied For _____ | | | | | | Date of Application _____ |
| How Did You Learn About Us? | | | | | | |
| <input type="checkbox"/> Advertisement | <input type="checkbox"/> Friend | <input type="checkbox"/> Relative | <input type="checkbox"/> Inquiry | <input type="checkbox"/> Drive-by | <input type="checkbox"/> Other _____ | |

| | | | | | | |
|---------------------|--------|------------|---------|------------------------|-------------|--|
| Last Name | | First Name | | | Middle Name | |
| Address | Number | Street | City | State | Zip Code | |
| Telephone Number(s) | | Day | Evening | Social Security Number | | |

Best time to contact you at home is: _____ : _____ am / pm

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever applied with us before? If yes, give date _____. Yes No

Do any of your friends or relatives work here? If Yes, state name & relationship _____. Yes No

What choice best reflects your intake of alcohol. never occasionally moderately frequently

Do you take any illicit drugs? Yes No Would you be willing to submit to a drug test? Yes No

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No

Proof of citizenship or immigration status will be required upon employment.

Date available for work ____/____/____ What is your desired salary range? _____

Are you available to work: Full Time Part Time (please indicate Mornings Afternoon Evenings) Temporary (please indicate dates available ____/____ thru ____/____)

Are you currently on "lay-off" status and subject to recall? Yes No

EDUCATION

| School | Name & Address of School | Course of Study | Years Completed | Diploma/Degree |
|------------------------|--------------------------|-----------------|-----------------|----------------|
| High School | _____ | _____ | _____ | _____ |
| Undergraduate College | _____ | _____ | _____ | _____ |
| Graduate/ Professional | _____ | _____ | _____ | _____ |
| Other (Specify) | _____ | _____ | _____ | _____ |

WORK EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

| Employer | Dates Employed From To | Work Performed |
|----------------------------|-------------------------------------------------------------|----------------------------------------------------------|
| Address | [] [] | |
| Telephone Number(s) | | |
| Starting/Present Job Title | Hourly Rate / Salary Starting Final | |
| Supervisor | [] [] | |
| Reason for Leaving | May We Contact? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| Employer | Dates Employed From To | Work Performed |
|----------------------------|-------------------------------------------------------------|----------------------------------------------------------|
| Address | [] [] | |
| Telephone Number(s) | | |
| Starting/Present Job Title | Hourly Rate / Salary Starting Final | |
| Supervisor | [] [] | |
| Reason for Leaving | May We Contact? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

| Employer | Dates Employed From To | Work Performed |
|----------------------------|-------------------------------------------------------------|----------------------------------------------------------|
| Address | [] [] | |
| Telephone Number(s) | | |
| Starting/Present Job Title | Hourly Rate / Salary Starting Final | |
| Supervisor | [] [] | |
| Reason for Leaving | May We Contact? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Comments: **Include explanation of any gaps in employment.**

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| |
| |
| |

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Additional Information

Specialized Qualifications *Please explain your experiences with, thoughts on and/or implementation of the following...*

Use of and/or familiarity with ACT brand sales software or similar product: _____

Use of and/or familiarity with Word / Excel: _____

Cold Calling: _____

Mass Emailing: _____

Travel: _____

Other Qualifications *Summarize special job-related skills and qualifications acquired from employment or other experience.*

Describe your feelings about and your success with the following sales situations:

Cold Calling: _____

Over the Phone: _____

In Person: _____

When traveling either local or long distance for a pre-arranged sales call how do you maximize your opportunities and time spent in that region?

Personal / Professional References (Do not include family members or past supervisors.)

| Name | Phone Number | Best Time to Call | Occupation |
|----------|--------------|-------------------|------------|
| 1) _____ | | | |
| 2) _____ | | | |
| 3) _____ | | | |

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless an authorized executive of this organization specifically acknowledges such change in writing.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date