

Application for Employment

The Civil Right Act of 1964 prohibits discrimination in employment because of race, color, religion, sex, national origin or disability. The Age Discrimination in Employment Act prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age.

PLEASE P	RINT								
Last Name		Firs	First Name			Middle Name			
Address		Stre	et		Apt. #				
City		Stat	e		Zip Code		•		
Social Security	/	Tele	Telephone						
					·	•			
If you are 18 y	ears of age, can y	ou provide requ	red proof of yo	ur eligibility to wo	ork?		Yes	No	
Can you furnis	h proof of identit	y and authorizati	on to work in th	ne U.S. prior to hir	e?		Yes	No	
Do you smoke	?						Yes	No	
		f a crime or four	nd responsible f	or a traffic violation	on? If yes, give da	ate and	Yes	No	
details of each					***************************************		<u> </u>		
Work Relate Positions appli Date available Are you seeking	ed Information ed for: to work: g: Full	rime:	Pa	rt Time:	To	emp:			
C	Sun .	Mon	Tue	Wed	Thu	Fri		Sat	
Start									
Have you ever	worked for this F	irm before?	If yes, sta	te dates and position	on held:				
Can you perfor	m functions for v	vhich you are ap	plying with or v	vithout reasonable	accommodation?)	Yes	No	
Who should be	notified in case	of an emergency	?						
Who should be notified in case of an emergency? Name: Relationship									
Address: Phone: Office () -									

Name:		
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Employment History: Date employed mm/yy Work performed Employer From То Address Telephone Number(s) Hourly Rate/Salary Starting Final Job Title Supervisor Reason for Leaving Date employed mm/yy Work performed Employer From To Address Telephone Number(s) Hourly Rate/Salary Starting Final Job Title Supervisor Reason for Leaving Date employed mm/yy Work performed Employer From To Address Telephone Number(s) Hourly Rate/Salary Starting Job Title Supervisor Reason for Leaving Work performed Date employed mm/yy Employer From To Address Telephone Number(s) Hourly Rate/Salary Starting Final Job Title Supervisor Reason for Leaving If you need additional space, please continue on a separate sheet of paper. Professional References: Must be someone who managed or supervised you. Phone Name Phone Name

Phone

Name

Application for Employment

Education:		
School	Date	Degree/Level
		in the fall of the
Acknowledgment:		
I hereby certify that the information given by m understand that any omission, misrepresentation consideration. I further understand that if employed or falsifications will result in the termination of my necessary and appropriate investigations to verify employers to release information pertaining to my v their employment. I further release all parties, inclu- all liability for any damage that may result from suitability for employment.	or falsification will p d, the subsequent disclosemployment. I hereby a the information contain work record, my work handing Bass & Associates	preclude my application from further sure of any omission, misrepresentation authorize Bass & Associates to make all ned herein and I authorize my former bits and my work performance while in and those individuals named herein for
In making this application for employment, I under reporting agency to include information as to my ch living, whichever may be applicable. If such an inv that such a report has been requested and that I wi period of time to receive additional detailed inform report.	aracter, general reputation estigative report is made Il have the right to mak	on, personal characteristics and mode of e, I understand I will receive such notice e a written request within a reasonable
I understand that, upon being hired, I will have to pr	ove authorization to wor	k in the United States.
I understand and agree that if I am offered emplo definite term and either Bass & Associates or I will time, with or without cause, and with or without no written contract of employment which is specific to & Associates.	have the right to terminotice. I also understand	nate the employment relationship at any that this status can only be altered by a
I further understand that my employment will initial hiring, but that my completion of that trial period Associates.		
I understand that this application will remain active in writing.	for a period of thirty (30	0) days unless I renew it personally and
Date	Signature	



Authorization to Release Information

I,				Bass & Ass		
make an independent investi those maintained by both pul						
ourpose of confirming the in	one and privat	toined on	myr annl	u an puone laation and	for obtain	ioi uic
						mig
other information which may	be material t	o my quan	meanon	s for empro	ymen.	
I release Bass & Associates, information pursuant to this in regard to the information cused. The following is my tracorrect to the best of my kno	authorization, obtained from rue and compl	from any any any and a	and all l	iabilities, c above refe	laims or l renced so	aw suits urces
Full Name:						
. r . 1						•
Maiden or other name used:	•					
Social Security:		. A.	-			. •
		•				
Signature:						
					•	
Date:						•
						



NOTICE/AUTHORIZATION AND RELEASE FOR THE PROCUREMENT OF A CONSUMER AND/OR INVESTIGATIVE CONSUMER REPORT (PLEASE PRINT OR TYPE)

I, the undersigned consumer, do hereby authorize Bass & Associates, PC by and through an independent contractor, KROLL BACKGROUND AMERICA, INC. ("KBA"), to procure a consumer report and/or investigative consumer report on me.

These above-mentioned reports may include, but are not limited to, information as to my character and general reputation, discerned through employment and education verifications; personal references; personal interviews; my personal credit history based on reports from any credit bureau; my driving history, including any traffic citations; a social security number verification; present and former addresses; criminal and civil history/records; any other public record.

I understand that I am entitled to a complete and accurate disclosure of the nature and scope of any investigative consumer report of which I am the subject upon my written request to **KBA**, if such is made within a reasonable time after the date hereof. I also understand that I may receive a written summary of my rights under 15 U.S.C. § 1681et. seq.

I further authorize any person, business entity or governmental agency who may have information relevant to the above to disclose the same to Bass & Associates, PC by and through KBA, including, but not limited to any and all courts, public agencies, law enforcement agencies and credit bureaus, regardless of whether such person, business entity or governmental agency compiled the information itself or received it from other sources.

I hereby release Bass & Associates, PC, KBA and any and all persons, business entities and governmental agencies, whether public or private, from any and all liability, claims and/or demands, by me, my heirs or others making such claim or demand on my behalf, for providing a consumer report and/or investigative consumer report hereby authorized

I understand that this Notice/Authorization Release form shall remain in effect for the duration of my employment with said Company. Additionally, I give permission to investigate any incidents of workplace misconduct or criminal activity for which I am alleged to have been involved during my employment. Further, I certify that the information contained on this Authorization/Release form is true and correct and that my application will be terminated based on any false, omitted or fraudulent information.

Signature:				
Printed Name:			D	Pate:
First	Middle	Last		
Other Names Used (alias, maiden, nickname)_				YEARS USED
Current Address:	·			
Street /P. O. Box City	State	Zip Code	County	Dates
Former Address:				
Street /P. O. Box City	State	Zip Code	County	Dates
Former Address:				
Street /P. O. Box City	State	Zip Code	County	Dates
Social Security Number: Daytime Telephone Number:				
Driver's License Number:	State of Issuance:	Dat	e of Birth*:	Gender*
Have you ever been sanctioned or had	d vour licenses suspend	ed or revoked?		Yes No
Are you currently under any investigation	Ves No			

^{*} This information will enable us to properly identify you in the event we find adverse information during the course of our background search.