

Application for Employment

To avoid any delay in consideration of your qualifications, this record must be filled out completely. In case of employment, any false statement will be considered sufficient cause for dismissal. All new employees are hired on a trial basis.

I hereby authorize the agency or its designated representative to contact my former employer, school, university, college, or any other information source available to them to gather data on me and my business and educational life deemed necessary to act on my application for, or continuation of, employment. The information may be gathered by the agency or any duly authorized investigative reporting or similar type agency. The information may include, but is not limited to, military records, employment records, school transcripts, and felony conviction records.

I willingly and freely release and hold absolutely harmless and deny any recourse on my behalf to any person, company, military agency, school, university, college, or any other individual, agency or institution who releases or provides information to the agency or its duly authorized representatives.

I further willingly agree without recourse against the agency, or any of its authorized representatives, to submit to any test not discriminatory and not illegal to further establish my background for personnel records.

I hereby acknowledge that I have been informed by the agency that, upon written request, disclosure concerning the nature and scope of any investigation into my background will be made available within five days after the agency receives my written request for such information. I understand that the agency is not required to disclose the contents of the investigative report, only the fact that one was requested and the type of information included.

I understand that nothing contained in this Application for Employment or in the granting of an interview is intended to create a contract between me and the agency for either employment or the provision of any benefits. I further understand that if any employment relationship subsequently is established, I will have the right to terminate my employment "at-will" at any time, and the agency will have the same right. I understand that "at-will" means that either party may terminate the employment relationship for any reason at any time. In addition, I understand that no promise, representation or agreement contrary to the foregoing is binding on the agency, unless made in writing and signed by an authorized officer of the agency.

If required by job classification and assignment, or in the event I use a personal vehicle during the course of business, I agree to furnish the agency with certification of automobile insurance, in accordance with existing requirements.

I certify that the information contained in this Application for Employment is correct to the best of my knowledge and understand that misrepresentation of the facts given in this application may be grounds for refusal to hire or grounds for termination of employment.

OUR POLICY, OUR INTENT . . .

It is the policy and practice of the agency to recruit, hire, train and promote qualified applicants without regard to race, color, religion, sex, age, national origin, disability, handicap, veteran status or other areas covered by federal, state or local fair employment laws and regulations.

It is the intent of the agency to provide a work place which is free of alcohol and drugs and to take reasonable measures necessary to ensure that use of drugs or abuse of alcohol by employees does not risk the success of the agency or its operations and will not otherwise affect its employees or its customers.

The agency recognizes that a successful approach to the problems attendant to drug use or abuse of alcohol require an interaction of education, assistance, deterrents, and discipline. Confidentiality and consistency with legal, safety, and security considerations are fundamental elements of this program.

This application becomes void after 60 days unless renewed.

Date _____

Signature of Applicant _____