

# APPLICATION FOR EMPLOYMENT

HOME-TECH IS AN EQUAL OPPORTUNITY EMPLOYER

Position(s) Applied For \_\_\_\_\_ Salary Desired \_\_\_\_\_

Please answer all questions. Resumes are not accepted in lieu of completion of this application. Note: This application was designed for use with several types of positions. Some questions may not be completely applicable to the position you are seeking; however, we ask that you answer all questions.

\_\_\_\_\_  
 Last Name (Please Print)                      First                      Middle                      Social Security Number                      Date

\_\_\_\_\_  
 Present Address:                      Street                      City/State                      Zip Code                      Telephone Number

Only U.S. citizens or aliens who have a legal right to work in the U.S. are eligible for employment. Can you, upon employment, submit documentation verifying your identity and your legal right to work in the U.S.?  Yes  No

Have you been convicted of any crime within the past 5 years?  Yes  No If yes, give dates and explain. (attach separate paper if necessary.) \_\_\_\_\_

A conviction will not necessarily disqualify you from employment.

Are you over 18 years of age?  Yes  No

EDUCATIONAL DATA				
School	Print Name, Number, Street Address, City, State, and Zip Code of each school	No. of Years Completed	Degree	Major Course of Study
High School				
College				
Graduate School				
Trade, Bus., Night, or Corres.				
Other				

Other Skills: List any other job-related skills, qualification, or licenses that support your application.  
 \_\_\_\_\_  
 \_\_\_\_\_

Honors Received: \_\_\_\_\_

In order to permit a check of your work and educational work records, should we be made aware of any changes of name or assumed name that you previously used?  Yes  No If Yes, identify names and relevant dates.  
 \_\_\_\_\_

Have you ever been dismissed or forced to resign from any employment?  Yes  No If yes, explain.

Are you now employed?  Yes  No Are you on layoff and subject to recall?  Yes  No

May we contact your present employer?  Yes  No Previous Employers?  Yes  No

Please Identify any exceptions and reason for not contacting prior employers: \_\_\_\_\_

Can you travel if job requires it?  Yes  No

Will you work overtime if asked?  Yes  No

Are there any hours, shifts, or days you will not work?  Yes  No If Yes, explain:

What foreign languages do you speak, read, or write? \_\_\_\_\_

Do you have any friends or relatives who work here?  Yes  No

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

### CHARACTER REFERENCES

List three persons not related to you, whom you have known at least one year.

	NAME	ADDRESS AND TELEPHONE	OCCUPATION
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

List below any other information or remarks that you wish to have considered as a part of your application of employment.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How did you hear about Home-Tech? \_\_\_\_\_

Have you filed an application here before?  Yes  No If yes, give date: \_\_\_\_\_

Have you ever been employed here before?  Yes  No If yes, give date: \_\_\_\_\_

## EMPLOYMENT EXPERIENCE

List each job held. Start with your present or last job. Include military experience. If known by any other name, please indicate.

1. Employer	DATES			Work Performed
	From	To		
Address				
Job Title	SALARY			
	Start	Final		
Supervisor				
Reason for Leaving				
May we make inquiries of this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No				

2. Employer	DATES			Work Performed
	From	To		
Address				
Job Title	SALARY			
	Start	Final		
Supervisor				
Reason for Leaving				
May we make inquiries of this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No				

3. Employer	DATES			Work Performed
	From	To		
Address				
Job Title	SALARY			
	Start	Final		
Supervisor				
Reason for Leaving				
May we make inquiries of this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No				

4. Employer	DATES			Work Performed
	From	To		
Address				
Job Title	SALARY			
	Start	Final		
Supervisor				
Reason for Leaving				
May we make inquiries of this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No				

Membership in organizations/Professional groups which, in your opinion, have a direct bearing on the position you are seeking. \_\_\_\_\_

Are you a veteran of the U.S Military Service?  Yes  No If yes, what branch of Service? \_\_\_\_\_

If yes, beginning date and ending date of active duty: From: \_\_\_\_\_ To: \_\_\_\_\_

Date of Discharge from Military Service: \_\_\_\_\_  
year/month year/month

## ADDITIONAL APPLICANT INFORMATION

1. How long have you been a resident in the area? \_\_\_\_\_

2. Do you have a Florida drivers license?  Yes  No

If Yes, DL# \_\_\_\_\_

3. Have you had any moving violations in the last 3 years?  Yes  No (applicable only to positions requiring the operation of company vehicles) If so, explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Home-Tech is a drug-free workplace, a pre-employment requirement is a negative drug and alcohol test result. Would you submit to this if considered for employment?

Yes  No

## NOTICE TO APPLICANTS

We comply with the Americans With Disabilities Act of 1990. During the interview process, you may be asked questions concerning your ability to perform job related functions. If you are given a conditional offer of employment, you may be required to complete a post-job offer medical history questionnaire and/or undergo a medical examination. If required, all entering employees in the same job category will be subject to the same medical questionnaire and/or examination and all information will be kept confidential and in separate files.

We are an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, sex, religion, national origin, handicap, or marital status. We assure you that your opportunity for employment with this Employer depends solely upon your qualifications.

### PLEASE READ AND SIGN STATEMENTS BELOW

I understand that, in accordance with Florida Statute 443.131(3)(a)(2), if hired, I will be placed on a 90-day probationary period. I further understand that if I am terminated for unsatisfactory work performance within the 90-day probationary period, the employer may seek to contest any unemployment benefit I might attempt to obtain as a result of my termination.  
\_\_\_\_\_ (initials)

I understand and agree that all policies, procedures and the Employee Handbook may be modified, amended, or deleted by the company with or without notice to me of such amendment, modification or deletion; that the policies and procedures are not intended to be a contract of employment nor do they give me a right of continued employment; and that my employment may be terminated at my option or at the option of Home-Tech with or without notice by either party. I also understand that there are no other arrangements, agreements, or understandings regarding the terms of employment. There may be no amendments or exceptions to this statement unless they are in writing and signed by the president. \_\_\_\_\_ (initials)

I understand that I may be required to undergo blood and/or urinalysis screening for drug or alcohol use as part of our pre-employment process. In addition, all employees are subject to blood and/or urinalysis screening for drug or alcohol use.  
\_\_\_\_\_ (initials)

I certify that all information given on this employment application; any resume that I submit to the company; and any related papers and answers given during oral interviews are true and correct. I understand that Home-Tech will make a thorough investigation of my work and personal history. I authorize the giving and receiving of any such information requested by the company during the course of such an investigation. I understand that falsification of any information given by others during the course of an investigation or any derogatory information discovered as a result of this investigation may subject me to immediate dismissal. I hereby release from liability all persons who provide information to my employer during the course of any such investigation. \_\_\_\_\_ (initials)

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

# AUTHORIZATION FOR HOME-TECH CONSOLIDATED, INC. TO OBTAIN A CONSUMER REPORT OR INVESTIGATIVE CONSUMER REPORT

I understand and authorize that Home-Tech Consolidated, Inc. may obtain a consumer report or investigative consumer report from any consumer reporting agency(s) for employment purposes, pursuant to the Fair Credit Reporting Act. The consumer report or investigative consumer report may include a credit report, criminal background check, driver=s license search, motor vehicle report, employment history or any other information as to my credit record, credit standing or capacity, character, general reputation, personal characteristics and mode of living. An investigative consumer report may involve personal interview with sources such as neighbors, friends, or associates. Upon written request from me, Home-Tech Consolidated, Inc. will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I release and hold harmless Home-Tech Consolidated, Inc. from any damages or claims whatsoever relating to Home-Tech Consolidated, Inc. obtaining any consumer report or investigate consumer report, including any claim under the Fair Credit Report Act.

I have read, understand and agree to the authorization for Home-Tech Consolidated, Inc. to obtain a consumer report and/or investigative consumer report on me.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant=s/Employee=s Signature

\_\_\_\_\_  
Home-Tech Witness

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date