

## Application

We are an equal opportunity employer and do not discriminate in our employment practices. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state or federal law. Equal access to employment, services and programs is available to all individuals. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of Employment & Training Centers, Inc or its subsidiary, Employment & Training Solutions, LLC.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Date : \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Position(s) Applied For: \_\_\_\_\_

Type of Employment Desired:    Full Time       Part Time       Temporary

Available as of: \_\_\_\_\_

Yes      No

Are you able to meet the attendance requirements for the position?

Do you have any objection to working overtime if necessary?

Can you travel if it is required for this position?

Have you ever been employed by Employment & Training Centers, Inc. or a subsidiary?

Can you submit proof of identity and legal employment authorization for the US?

Have you ever been convicted of a crime or are there pending criminal proceedings against you?

If yes, please explain (an affirmative answer will not automatically bar employment):

\_\_\_\_\_

How were you referred to us? \_\_\_\_\_

### Employment History

Please provide all employment information for your past three employers, starting with the most recent.

Employer: _____	Position Held: _____
Address: _____	Telephone #: _____
Immediate Supervisor (Name & Title): _____	
Employed From: _____	To: _____ Salary: _____
Position Summary: _____	
Reason for Leaving: _____	

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### Other Skills and Qualifications

Please list any additional skills, qualifications, licenses, or certifications: \_\_\_\_\_

### Educational History

List school name and location, years completed, course of study, and any degrees earned.

### Professional References

List 3 professional references. Please do not include relatives.

Name: _____	Telephone #: _____
# Years Known: _____	Relationship: _____

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I hereby authorize Employment & Training Centers, Inc, and its subsidiaries (ETC) to contact all previous employers, educational institutions and references in order to verify the accuracy of information contained in this application. I also release ETC and its representatives from liability for seeking, gathering and using such information to make employment decisions, and I release all other persons or organizations from liability for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment, and that this application does not constitute an agreement or contract for employment. Accordingly, either party can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable state or federal law. I further release ETC from any liability for responding to requests for information pertaining to reference checks and employment verifications.

I understand that it is the policy of ETC not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the Americans with Disabilities Act (ADA).

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of my first day of employment. Failure to submit such proof within the required time shall result in the immediate termination of my employment.

I also understand and agree that a drug and alcohol screening may be required of me. I hereby give my voluntary consent for a blood and/or urine sample to be collected from me and submitted for testing. I also consent to the release of the test results to ETC for its use. I understand that any positive drug or alcohol result may preclude my employment.

By clicking "SUBMIT", I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.