

Bandon IT - Application for Employment

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, orientation, age, national origin, ancestry, physical or mental disability, or veteran status.

Date _____
Last name _____ First name _____ Middle name _____
Street Address _____
City _____ State _____ ZIP _____
Telephone _____ Social Security # _____

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted basis? (You may be required to provide documentation.) Yes No

Are you looking for full-time employment? Yes No

If no, what hours are you available? _____

Are you willing to work swing shift? Yes No

Are you willing to work overtime? Yes No

Do you have transportation for onsite work? Yes No

Have you ever been convicted of a felony? (This will not necessarily affect your application.)
Yes No

If yes, please describe conditions. _____

Employment Desired

Position applied for _____

How did you hear of this opening? _____

Have you ever applied for employment here? Yes No

When? _____

Where? _____

Have you ever been employed by this company? Yes No

When? _____

Where? _____

Are you presently employed? Yes No

May we contact your present employer? Yes No

Are you available for full-time work? Yes No

Are you available for part-time work? Yes No

Will you relocate? Yes No

Date you can start _____

Desired position _____

Desired starting salary _____

Please list applicable skills _____

Education

	School Name and Location	Year	Major	Degree
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
College	_____	_____	_____	_____
Post-College	_____	_____	_____	_____
Other Training	_____	_____	_____	_____

In addition to your work history, are there are other skills, qualifications, or experience that we should consider?

Please list any scholastic honors received and offices held in school.

Are you planning to continue your studies? Yes No

If yes, where and what courses of study?

Employment History (Start with most recent employer)

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____

May we contact? Yes No

Responsibilities _____

Reason for leaving _____

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____

May we contact? Yes No

Responsibilities _____

Reason for leaving _____

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____

May we contact? Yes No

Responsibilities _____

Reason for leaving _____

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

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Reason for leaving _____

Company Name _____

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Date Started _____ Starting Wage _____ Starting Position _____

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May we contact? Yes No

Responsibilities _____

Reason for leaving _____

Company Name _____

Address _____ Telephone _____

Date Started _____ Starting Wage _____ Starting Position _____

Date Ended _____ Ending Wage _____ Ending Position _____

Name of Supervisor _____

May we contact? Yes No

Responsibilities _____

Reason for leaving _____

References

List three personal references, not related to you, who have known you for more than one year.

Name _____ Phone _____ Years Known _____

Address _____

Name _____ Phone _____ Years Known _____

Address _____

Name _____ Phone _____ Years Known _____

Address _____

Emergency Contact

In case of emergency, please notify:

Name _____ Phone _____

Address _____

Name _____ Phone _____

Address _____

Please Read Before Signing:

I certify that all information provided by me on this application is true and complete to the best of my knowledge and that I have withheld nothing that, if disclosed, would alter the integrity of this application.

I authorize my previous employers, schools, or persons listed as references to give any information regarding employment or educational record. I agree that Bandon IT and my previous employers will not be held liable in any respect if a job offer is not extended, or is withdrawn, or employment is terminated because of false statements, omissions, or answers made by myself on this application. In the event of any employment with Bandon IT, I will comply with all rules and regulations as set by the company in any communication distributed to the employees.

In compliance with the Immigration Reform and Control Act of 1986, I understand that I am required to provide approved documentation to Bandon IT that verifies my right to work in the United States on the first day of employment

I understand that employment at Bandon IT is “at will,” which means that either I or Bandon IT can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I hereby acknowledge that I have read and understand the above statements.

Signature _____ Date _____

DISCLOSURE AND AUTHORIZATION
IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION
DISCLOSURE REGARDING BACKGROUND INVESTIGATION

[Bandon IT] may obtain information about you from a consumer reporting agency (CRA) for employment purposes. Thus, you may be the subject of a “consumer report” and/or an “investigative consumer report” which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records (“driving records”), verification of your education or employment history, or other background checks. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by Employers Choice Online, 8138 2nd Street, Downey, CA 90241 (800) 424-7011, or another outside organization. The scope of this notice and authorization is all-encompassing, however, allowing **Bandon IT** to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

New York applicants or employees only: You have the right to inspect and receive a copy of any investigative consumer report requested by **[Bandon IT]** by contacting the consumer reporting agency identified above directly.

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of “consumer reports” and/or “investigative consumer reports” by the Company at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by **Employers Choice Online, 8138 2nd Street, Downey, CA 90241 (800) 424-7011**, another outside organization acting on behalf of **[Bandon IT]**, and/or **[Bandon IT]** itself. I agree that a facsimile (“fax”), electronic or photographic copy of this Authorization shall be as valid as the original.

California applicants or employees only: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law.

Minnesota and Oklahoma applicants or employees only: Please check this box if you would like to receive a copy of a consumer report if one is obtained by the Company.

Last Name:	First:	Middle Name:
Alias Names:		
* Social Security #: <input type="checkbox"/> <input type="checkbox"/>	* Date of Birth: <input type="checkbox"/> <input type="checkbox"/> 19	<i>(YEAR OF BIRTH IS VOLUNTARY)</i>
Drivers' License #:	State of Drivers License	
Current Address:	Home Phone #:	Cellular Phone #:
City / State / Zip code:		
Signature:	Date:	

*PROVIDING YEAR OF BIRTH IS STRICTLY VOLUNTARY. THIS INFORMATION WILL ALLOW ECO TO PROPERLY IDENTIFY YOU IN THE EVENT WE FIND ADVERSE INFORMATION DURING THE COURSE OF A BACKGROUND INVESTIGATION. YOUR INFORMATION WILL NOT BE USED AS HIRING CRITERIA.