



HANDZ-ON, INC.
HELPING ACHIEVE NEW DIRECTION

Employment Application

APPLICANT NOTICE: The following pre-employment procedures will be conducted upon acceptance of a contingent offer of employment:

- **Criminal background check**
- **Valid Driver's license**
- **Verification of vehicle insurance**
- **Verification of academic credentials, if applicable**

Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Current Address: _____
Street Apartment/Unit #

_____ *City State ZIP Code*

Previous Address: _____

Phone: _____ Email _____

Social Security _____ Driver's License # _____

State issued _____ Expiration date _____ Auto insurance policy _____ Exp. Date _____

Positions Applied for: _____

Have you ever applied to Handz On in the past? _____ If yes, date of application _____

Why are you interested in employment with us?

Please describe any experience you have as it relates to the position you are applying for

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

If yes, what was the reason for leaving? _____

Education

Please circle highest grade completed: Grade School: 6 7 8 High School: 9 10 11 12 College: 13 14 15 16 16+

School Type	School Name	City, State	# Yrs Attended	Graduated/degree
High school/GED				
Vocational/Technical				
College/University				

For employment our minimum education requirement is either a GED or High School diploma

OTHERSKILLS/QUALIFICATIONS/CERTIFICATIONS: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous employer? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous employer? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous employer? YES NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

It is the policy of Handz-On, Inc. to afford equal opportunity to all employees and applicants for employment without regards to age, race, religion, color, sex, national origin, marital status, or pregnancy, and to afford equal opportunities to veterans and individuals with a disability, and any characteristics protected by Federal, State, or Local Law.

I understand and acknowledge that any employment relationships with this organization is of and "AT WILL" nature, which means that the employee may resign at any time and the employer may discharge the employee at any-time with or without cause. It is further understood that this "AT WILL" employment relationship may not be changed by any verbal or written statements or by conduct unless the administrative director of Handz-On specifically acknowledges such change in writing.

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____