





- I understand that employment will be on an at will basis and may be terminated at any time by either party with or without notice.
- I authorize this company to seek information about me from whatever source and I agree to hold the company harmless from any and all claims arising from such requests for information.
- I also agree that all former employees or any other persons may furnish this company and subsidiaries with all information regarding their record of my service, character, and reason for leaving. I hereby release such former employers and persons from all liability for providing such information.
- I understand that any false, incomplete or misleading information on this application may result in my dismissal whenever discovered.
- I understand that any unanswered questions on this application may cause this application to be rejected

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

**THIS APPLICATION WILL BE RETAINED IN OUR ACTIVE FILES FOR ONE (1) YEAR ONLY**

<b>OFFICE USE ONLY</b>		
<b>Name</b> _____	<b>SSN:</b> _____	<b>Position</b> _____
<b>Date Employed</b> _____	<b>Wage and Hour Statue</b> ( ) Exempt ( ) Non Exempt ( ) Other	
<b>Salary</b> _____	<b>Date of Birth</b> _____	<b>Marital Status</b> _____
<b>Other</b> _____		