# **APPLICATION FOR EMPLOYMENT**

## PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE



PLEASE COMPLETE			DATE		
Name	Last	First	Middle		Maiden
Present address					
	Number	Street	City State	Zip	
How long there		\$	Social Security No.	=	
Telephone ()	Other	(	email		
-	work in the United States?		Days/hours av	ailable to work	
Position applied for (1)	)			Thur Fri	
and salary desired (2)	)		Tue	Sat Sun	
Can you travel if requir	ou work weekly?ed by the position?				
Employment desired					
Date available to start work					
If yes, explain number	EN CONVICTED OF A CR of conviction(s), nature of ) imposed, and type(s) of t	offense(s) leading to			
EDUCATION	NAME OF SCHOOL	LOCATION (Complete mailir address)		R OF YEARS PLETED	MAJOR & DEGREE / CERTIFICATION
High School					

EDUCATION	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE / CERTIFICATION
High School		,		
Trade / Professional				
0.11				
College				

## **APPLICATION FOR EMPLOYMENT – Continued**

	T		
MIL	ITARY		
HAVE YOU EVER BEEN IN THE ARMED FORCES?	☐ Yes ☐ No		
ARE YOU NOW A MEMBER OF THE NATIONAL GUARD?	☐ Yes ☐	No	
Date Entered Discharge Date _		Honorable?	□ Yes □ No
Please list one reference other than a relative or previous em	olover.		
·	•		
Name			
Address			
	Telephone ()		
<u></u>			
Work Please list your work experience for at least Experience If you were self-employed, give firm name.	the <b>past five years</b> be <b>Attach additional she</b>	eginning with your mos ets if necessary.	t recent job held.
	1		
Name of employer	Name of last	Employment dates	Pay or salary
Address	supervisor		
City, State, Zip Code		From	Start
Phone number		То	Final
May we contact this employer? ☐ Yes ☐ No	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned	•	omotions while at this t	отрапу.
YOU MAY REFERENCE YOUR RESUME   See Resume?	u res u no		

## **APPLICATION FOR EMPLOYMENT – Continued**

	1	1			
Name of employer	Name of last supervisor	Employment dates	Pay or salary		
Address					
City, State, Zip Code		From	Start		
Phone number		То	Final		
	Your Last Job Title				
Reason for leaving (be specific)	l				
List the jobs you held, duties performed, skills used or learned,	advancements or pro	motions while at this o	company.		
YOU MAY REFERENCE YOUR RESUME   See Resume?					
·					
Name of employer	Name of last supervisor	Employment dates	Pay or salary		
Address					
City, State, Zip Code		From	Start		
Phone number		То	Final		
	Variable title	1			
	Your last job title				
Reason for leaving (be specific)					
Liet the jobs you hold, duties performed, skills used or learned	advancements or pro	motions while at this c	ompany		
List the jobs you held, duties performed, skills used or learned, advancements or promotions while at this company.					
YOU MAY REFERENCE YOUR RESUME   See Resume?	l Yes □ No				

#### **PLEASE READ CAREFULLY**

#### **APPLICATION FORM WAIVER**

In exchange for the consideration of my job application by Enfold Systems, Inc. (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Company, or otherwise to change in any respect the employment-at-will relationship between Company and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President / Senior Management of the Company.

Both the undersigned and Company may end the employment relationship at any time, without specified notice or reason, so long as there is no violation of applicable federal or state law. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any wrong or incomplete information provided 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.

I further understand that my employment with the Company shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party. 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 being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions	represent and warrant that I have	read and fully understand	the foregoing, and that I	I seek employment unde	er these conditions.
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Signature of applicant	Date:	

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.

Thank you for completing this application form and for your interest in Enfold!