

BROCKINGTON AND ASSOCIATES, INC.

APPLICATION FOR EMPLOYMENT

Brockington and Associates, Inc., is an equal opportunity employer and does not discriminate against applicants for employment and employees on the basis of race, color, creed, religion, ancestry, age, gender, national origin, disability or veteran status.

Note: This application for employment is good for thirty (30) days only. Consideration for employment after thirty (30) days requires a new application.

EMPLOYMENT INTEREST

Date: _____ When is the earliest date you could start work? _____

Position Sought: _____

Full Time _____ Part Time _____

Salary Requirements _____

Have you ever applied for employment with Brockington and Associates before?

Yes _____ No _____

From what source specifically did you first learn of this position? _____

Are you able to perform fully all job functions of the position you are applying for with or without reasonable accommodation?

Yes _____ No _____

PERSONAL:

Name: _____
Last First Middle

All other names you have used: _____

Address: _____
Number and Street City State Zip Code

Daytime Phone: _____ Cell Phone: _____

Email Address: _____ Social Security Number: _____

Are you over 18 years of age?

Yes _____ No _____

Are you legally eligible for employment in the United States?

Yes _____ No _____

(If offered employment, you will be required to provide documentation to verify eligibility.)

EDUCATION:

(Please indicate education or training which you believe qualifies you for the position you are seeking.)

HIGH SCHOOL: Number of years completed *(circle one)*: 1 2 3 4

Diploma: Yes _____ No _____ GED: Yes _____ No _____

School(s): _____ City/State: _____

COLLEGE AND/OR VOCATIONAL SCHOOL: Number of years completed *(circle one)*: 1 2 3 4 5 6 7 8

School(s): _____ City/State: _____

Major: _____ Degrees Earned: _____

OTHER TRAINING OR DEGREES:

School(s): _____ City/State: _____

Course(s): _____ Degree or Certificate Earned: _____

PROFESSIONAL LICENSE OR MEMBERSHIP:

Type of License(s) Held: _____

License Number: _____ License Expiration Date: _____

Other Professional Memberships _____

(You need not disclose membership in professional organizations that may reveal information regarding race, color, creed, gender, religion, national origin, ancestry, age, disability, veteran status or any other protected status.)

RECORD OF CONVICTION:

During the last ten (10) years, have you ever been convicted of a crime other than a minor traffic offense?

Yes _____ No _____

If yes, explain: _____

(A conviction will not necessarily automatically disqualify you for employment. Rather, such factors as the nature and gravity of the offense, the amount of time that has passed since the conviction and/or completion of the sentence and the nature of the job applied for will be considered.)

EMPLOYMENT:

Have you ever been employed in any capacity of Brockington and Associates?

Yes _____ No _____

If so, please state location and dates of employment. _____

List all employers, last employer first, including US Military Service.

May we contact your present employer?

Yes _____ No _____

If employment was under a different name, indicate name.

Employer: _____

Address: _____

Telephone: _____

Position: _____

Dates of Employment: From: _____ to: _____ Salary: _____

Supervisor: _____ Department: _____

Duties: _____

FT _____ PT _____ Number of Hours per Week: _____

Reason for Leaving: _____

Employer: _____

Address: _____

Telephone: _____

Position: _____

Dates of Employment: From: _____ to: _____ Salary: _____

Supervisor: _____ Department: _____

Duties: _____

FT _____ PT _____ Number of Hours per Week: _____

Reason for Leaving: _____

Employer: _____
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Employer: _____
Address: _____
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Position: _____
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Supervisor: _____ Department: _____

Duties: _____
FT _____ PT _____ Number of Hours per Week: _____
Reason for Leaving: _____

Explain any gaps in work history: _____

Have you ever been suspended, discharged or asked to resign from a job?
Yes _____ No _____
If yes, explain: _____

REFERENCES:

PROFESSIONAL: Provide at least three references from previous and/or current supervisors:

Name	Company	Title	Address	Phone
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

PERSONAL:

Name	Relationship	Address	Phone
_____	_____	_____	_____
_____	_____	_____	_____

DRIVING RECORD:

Please provide information about your driving history:

Do you have a driver's license?
Yes _____ No _____
If yes, State and class _____

Has your driver's license ever been suspended or revoked?
Yes _____ No _____
If yes, explain _____

Have you had a ticket for a moving violation during the past ten (10) years?
Yes _____ No _____
If the resolution of the ticket was a finding of guilty, identify the violation charged in each ticket, the date and the jurisdiction issued: _____

APPLICANT'S CERTIFICATION AND AGREEMENT:

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I authorize Brockington and Associates to verify their accuracy and to obtain reference information on my work performance, and to contact former employers, schools and references listed on the application. I hereby release Brockington and Associates from any and all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that any false statement, misrepresentation or omission of facts called for on this application or on any supporting documentation, regardless of when discovered to be false, misrepresented or omitted, shall be considered sufficient basis for rejection of my application or termination of my employment by Brockington and Associates

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies and rules of employment of Brockington and Associates I further understand that neither the policies nor rules of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I

understand that any employment offered is at will and that either I or Brockington and Associates may terminate my employment at any time with or without cause.

I understand that if I am hired for a position that requires operation of a motor vehicle as part of the job, both my hiring and my continued employment in that position will be contingent upon verification of and maintaining a satisfactory driver's record.

Signature of Applicant

Date

Printed Name