

accelerated inspection services

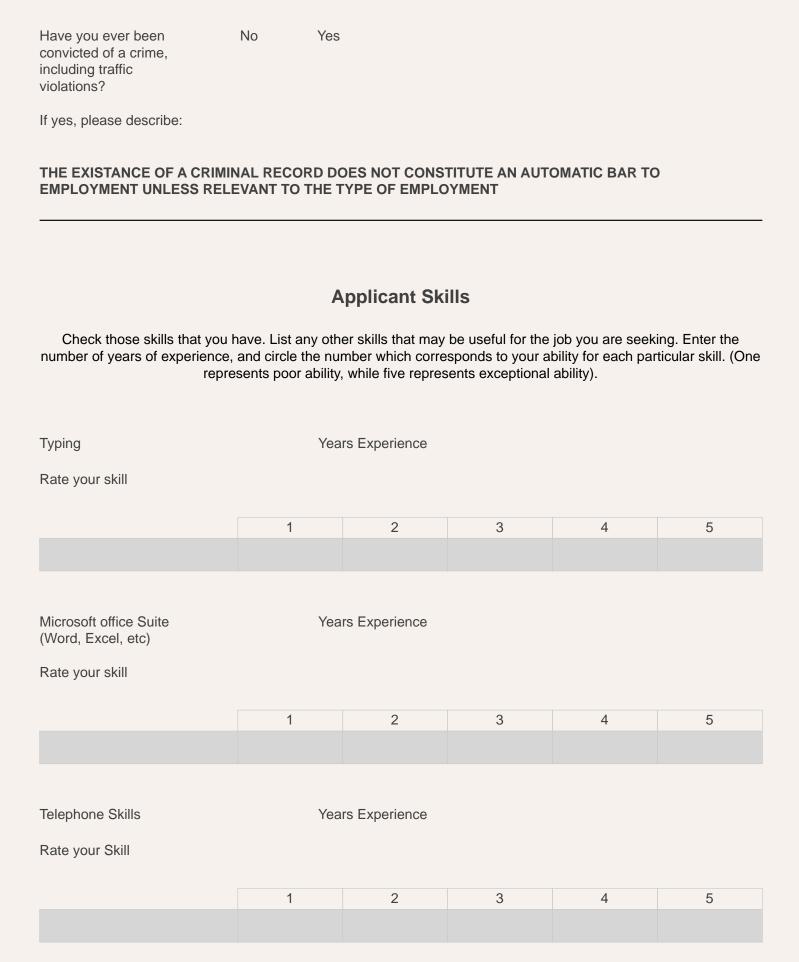
Your primary source to reduce and eliminate risk

Employment Application

It is the policy of Accelerated Inspection Services to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status.

Your Contact Information

First Name	Last Name
E-mail Address	Home Phone
Address:	
Number of years at this address:	
Social Security Number	
Driver's License (State/ Number)	
Emergency Contact and Address & Phone	Relationship to you
Job Position Applied For:	
Who referred you to our company?	
How will you get to work?	
If you are offered employment, when would you be available to begin work?	



Customer Service	Yea	urs Experience			
Rate your skill					
					_
	1	2	3	4	5
Organizational Skills Years Experience:					
Rate your skill					
	1	2	3	4	5

Other: Describe

Applicant Employment History

Current or most recent employment first:

Supervisor Name:

Address:

City/State/Zip:

Job Duties:

Reason for leaving:

Dates of Employment (Month/Year):

Employment History continued

Employer Name:
Supervisor Name:
Address:
City/State/Zip:
Job Duties:
Reason for leaving:
Dates of Employment (Month/Year):
Employer Name:
Supervisor Name:
Address:
City/State/Zip:
Job Duties:
Reason for leaving:
Dates of Employment (Month/Year):

Education / Training

College/University Name and Address

Did you receive a degree?

Yes No

If yes, degree received:

High School/GED Name and Address

Education / Training continued

Yes

No

Did you receive a

degree?
Other Training (graduate, technical, vocational):
Awards, Honors, Special Achievements:
References
List and two people who would be willing to provide a reference for you.
Name:
Address:
City/State/zip:
Telephone:
Relationship:
Name:
Address:
City/State/zip:
Telephone:
Relationship:

CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Accelerated Inspection Services to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its Owner, the employment relationship will be "at-will". In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative or employee of Accelerated Inspection Services, except in a specific written contract of employment signed on behalf of the organization by its Owner, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

APPLICANTS SIGNATURE	
Date	