

## **Application for Employment**

Personal Information									
Full Name:					Date:				
	Last	First		М.І.					
Address:									
	Street Address				Apartment/	'Unit #			
	City			State	ZIP Code				
Phone:			Email						
Date Availa	ble:	Desired Salary:							
Position Ap	plied for:								
Are you legally authorized to work in the United States? (If hired, you will be required to YES provide proof of work authorization.)									
If Selected	for Employment Are	YES							

Education								
School Name	Location	Years Attended	Degree Received	Major				

## Skills and Qualifications

Summarize any special training, skills, license and/or certificates that may assist you in performing the position for which you are applying:



Employment History – Minimum of 3 Years								
Company:			Phone:					
Adress			Supervisor:					
Job Title:		Starting Salary:	Ending Salary: <u>\$</u>					
Responsibilitie	es:							
	To: Reason for Leaving:							
Company:			Phone:					
Address:								
Job Title:		Starting Salary:	Ending Salary: <u>\$</u>					
Responsibilitie	es:							
From:	То:	Reason for Leaving:						
Agreement								

## **Please Read Carefully Before Signing This Form**

All information contained in this application is true and correct to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am hired.

I authorize the company to investigate my responses on this application and contact any or all of my former employers or any individuals familiar with my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information about my employment. I voluntarily and knowingly fully release and hold harmless any person or organization that provides information pertaining to me or my employment.

I understand that upon receiving a job offer, a physical examination and drug screening may be required. (Note: If this is a job requirement, you will be notified.)

Regardless of whether or not I become employed by the company, I recognize this application is not and should not be considered a contract of employment. I understand that employment at the company is on an at-will basis and that my employment may be terminated with or without cause, and without notice, at any time, at my option or the company's, unless specifically provided otherwise in a written employment contract. I further understand that no company employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than the President, and then only by means of a signed, written document.

Signature:

Date:

## Thank you for your interest in Dakota Technologies Company