



**EMPLOYMENT APPLICATION**

All qualified applicants will receive consideration without discrimination because of race, creed, color, sex, sexual orientation, age, national origin, handicap, veteran or any other protected class. The information requested is needed for a legally permissible reason including, without limitation, national security considerations, a legitimate occupational qualification or business necessity.

**PLEASE PRINT**

_____	_____	_____	_____
Last Name	First Name	M.I.	Date
_____	_____	_____	_____
Address No. & Street	City	State	Zip
(____) _____-_____	(____) _____-_____	_____	_____
Primary Phone	Secondary Phone	E-Mail	

**EMPLOYMENT DESIRED**

Position applying for: \_\_\_\_\_

Are you applying for:

Regular full-time work?.....Yes \_\_\_ No \_\_\_

Regular part-time work?.....Yes \_\_\_ No \_\_\_

Temporary work, e.g., summer or holiday work?.....Yes \_\_\_ No \_\_\_

What days and hours are you available for work? \_\_\_\_\_

If applying for temporary work, during what period of time will you be available?

From: \_\_\_\_\_ To: \_\_\_\_\_

Are you available to work on weekends?.....Yes \_\_\_ No \_\_\_

Would you be available to work overtime, if necessary?.....Yes \_\_\_ No \_\_\_

If hired, on what date can you start work? \_\_\_\_\_ Salary Desired: \_\_\_\_\_

**PERSONAL INFORMATION**

Have you ever applied to or worked for Syncrotech before?.....Yes \_\_\_ No \_\_\_

If yes, when and for what position? \_\_\_\_\_

Do you have any friends or relatives working for Syncrotech?.....Yes \_\_\_ No \_\_\_

If yes, state name(s) and relationship:

_____	_____
Name	Relationship
_____	_____
Name	Relationship

Why are you applying for work at Syncrotech? \_\_\_\_\_

If hired, would you have a reliable means of transportation to and from work? \_\_\_ Yes \_\_\_ No \_\_\_

Are you at least 18 years old?.....Yes \_\_\_ No \_\_\_

(If under 18, hire is subject to verification that you are of minimum legal age.)

Are you a U.S. Citizen?.....Yes \_\_\_ No \_\_\_

If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country?.....Yes \_\_\_ No \_\_\_

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?.....Yes \_\_\_ No \_\_\_  
If no, describe the functions that cannot be performed. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
*Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.*

Have you ever been convicted of a criminal offense?.....Yes \_\_\_ No \_\_\_  
If yes, state nature of the crime(s), when and where convicted, and disposition of the case. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
*Note: No applicant will be denied employment solely on the grounds of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.*

**Answer the following questions if you are applying for a professional position:**

Are you licensed/certified for this position?.....Yes \_\_\_ No \_\_\_

Name of license/certification: \_\_\_\_\_ Issuing State: \_\_\_\_\_

License/certification number: \_\_\_\_\_

Has your license/certification ever been revoked or suspended?.....Yes \_\_\_ No \_\_\_  
If yes, state reason(s), date of revocation or suspension, and date of reinstatement.

\_\_\_\_\_  
\_\_\_\_\_

**EMPLOYMENT HISTORY**

List below all present and past employment starting with your most recent employer (last ten years is sufficient). Account for all periods of unemployment. You must complete this section even if attaching a resume.

Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_ Hourly Rate or Annual Salary \_\_\_\_\_

\_\_\_\_\_  
Name of Employer (\_\_\_\_\_) Telephone No. \_\_\_\_\_

\_\_\_\_\_  
Type of Business Your Supervisor's Name \_\_\_\_\_

\_\_\_\_\_  
Address & Street City State Zip

\_\_\_\_\_  
Your Position and Duties \_\_\_\_\_

\_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

May we contact this employer for a reference?.....Yes \_\_\_ No \_\_\_

Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_ Hourly Rate or Annual Salary \_\_\_\_\_

\_\_\_\_\_  
Name of Employer (\_\_\_\_\_) Telephone No. \_\_\_\_\_

\_\_\_\_\_  
Type of Business Your Supervisor's Name

\_\_\_\_\_  
Address & Street City State Zip

\_\_\_\_\_  
Your Position and Duties

\_\_\_\_\_  
Reason for Leaving

May we contact this employer for a reference?..... Yes No

Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_ Hourly Rate or Annual Salary \_\_\_\_\_

\_\_\_\_\_  
Name of Employer (\_\_\_\_\_) Telephone No. \_\_\_\_\_

\_\_\_\_\_  
Type of Business Your Supervisor's Name

\_\_\_\_\_  
Address & Street City State Zip

\_\_\_\_\_  
Your Position and Duties

\_\_\_\_\_  
Reason for Leaving

May we contact this employer for a reference?..... Yes No

Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_ Hourly Rate or Annual Salary \_\_\_\_\_

\_\_\_\_\_  
Name of Employer (\_\_\_\_\_) Telephone No. \_\_\_\_\_

\_\_\_\_\_  
Type of Business Your Supervisor's Name

\_\_\_\_\_  
Address & Street City State Zip

\_\_\_\_\_  
Your Position and Duties

\_\_\_\_\_  
Reason for Leaving

May we contact this employer for a reference?..... Yes No



**PLEASE READ CAREFULLY, INITIAL EACH PARAGRAPH AND SIGN BELOW.**

\_\_\_\_\_ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

\_\_\_\_\_ I hereby authorize Syncrotech to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to Syncrotech any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release Syncrotech, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

\_\_\_\_\_ I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and Syncrotech. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or Syncrotech, and that no promises or representations contrary to the foregoing are binding on Syncrotech unless made in writing and signed by me and Syncrotech's designated representative.

\_\_\_\_\_ Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by Syncrotech, I am entitled to copies of any such public records obtained by Syncrotech unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

I waive receipt of a copy of any public record described in the paragraph above.

\_\_\_\_\_

Name

\_\_\_\_\_

Date

**Affirmative Action/Equal Opportunity Employer**

