

Application for Employment – Lundberg & Associates

We are an equal employment employer. No question on this application is used for the purpose of limiting or excluding any applicant for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodations for the application and / or interview process should notify a representative of the organization.

Applicant name: _____ Date: _____

Address: _____

Telephone: _____ Date you are available to start work: _____

Can you provide proof of identity and citizenship? Yes No

Have you lived outside of the United States for more than six (6) months in the last five (5) years?
 Yes No

If yes, where? _____

Have you ever been convicted of a felony? Yes No

If yes, please explain: _____

Have you ever been convicted of a misdemeanor? Yes No

If yes, please explain: _____

Have you ever been a notary? Yes No

If yes, have you ever had a claim made against you for improper notarial acts? Please explain: _____

Are you a smoker? ***Tobacco Screening is conducted*** Yes No

Have you filed for Bankruptcy in the last 7 years? Yes No

Do you have a valid driver's license? Yes No

Employment History Please provide information for your past four employers starting with the most recent.

Employer: _____ **Position held:** _____

Address: _____ **Telephone No.** _____

Immediate supervisor and title: _____

Dates employed: from _____ to _____ **Salary:** _____

Job summary: _____

Reason for leaving: _____

Employer: _____ **Position held:** _____

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Job summary: _____

Reason for leaving: _____

Employer: _____ Position held: _____

Address: _____ Telephone No. _____

Immediate supervisor and title: _____

Dates employed: from _____ to _____ Salary: _____

Job summary: _____

Reason for leaving: _____

Other Skills and Qualifications

Summarize your job-related training, skills, certificates, and / or other qualifications:

References

List 2 reference names, relation, telephone numbers, and years known: (do not include relatives):

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

I understand that any misrepresentation or material omission made 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.

If I am employed, I acknowledge that there is no specific length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or Lundberg & Associates can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable state or federal law.

I understand that it is the policy of Lundberg & Associates not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by the ADA.

I understand that pre-employment drug, tobacco, criminal background and credit screening are a condition of employment and all employees are required to participate in random drug testing while employed. I understand that my term of employment does not start until I have successfully completed the pre-employment drug, tobacco, criminal background and credit screening. I further understand that either refusal to submit to such screening or test results indicating drug or tobacco usage disqualifies me from further consideration for employment. Further, I understand that any positive drug test results will be communicated in a confidential manner.

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 could result in immediate termination.

I represent and warrant that I have read and fully understand the foregoing and that I seek employment under those conditions.

Applicant signature: _____ Date: _____