

Employee Application

NOTE: APPLICANT MUST COMPLETE ALL SECTIONS OF THIS FORM

NAME: _____ DATE: _____

POSITION APPLIED FOR: _____

An Equal Opportunity Employer

DeNyse Companies is an equal opportunity employer. DeNyse Companies maintains and enforces a policy of equal employment opportunity without regard to race, color, religion, sex (including pregnancy, gender identity, and sexual orientation), age, national origin, disability or genetic information, military status, or any other classification protected by state or federal law. This policy of nondiscrimination applies to all aspects of employment including, but not limited to: recruiting, hiring, training, promotion, transfer, discipline, layoff, recall, benefits, compensation, social/recreational programs and termination.

PLEASE INDICATE HOW YOU LEARNED OF THE JOB OPPORTUNITY.

- Walk-In
- Employee Referral _____
- Classified Ad _____
- Government Agency _____
- Former Employee _____
- Employment Agency _____
- Social Media _____

FOR OFFICE USE ONLY

EMPLOYEE NUMBER: _____ HIRE DATE: _____

DEPARTMENT: _____ WAGE: _____ Per Hour

W-C CODE: _____ SALARY: _____ Per Pay Period

PERSONAL INFORMATION

Full Name _____ E-mail _____

PRESENT ADDRESS:

Street Address: _____

City _____ State _____ Zip _____ Phone No _____

FORMER ADDRESS:

Street Address _____

City _____ State _____ Zip _____

TYPE OF WORK DESIRED (Describe) _____ Part Time Full Time

ARE YOU 18 YEARS OF AGE OR OLDER? YES NO (IF UNDER 18, PLEASE STATE YOUR AGE) _____

ARE YOU ON LAY-OFF SUBJECT TO RECALL ELSEWHERE? _____

DATE AVAILABLE FOR EMPLOYMENT _____ MINIMUM SALARY REQUIREMENTS \$ _____

Have you made previous application to this organization? YES NO If yes, when? _____

Have you been employed here previously? YES NO

If yes, when? _____ In what position? _____

Have you been convicted of any crime, other than minor traffic violations but including DUI, in the past five years? YES NO

If yes, please explain: _____
CONVICTION FOR AN OFFENSE WILL NOT NECESSARILY DISQUALIFY YOU FROM CONSIDERATION

Number of days absent from work last year: _____

Do you have transportation to work? YES NO Will you work overtime if asked? YES NO

EDUCATION

	Name & Location of School	No. of Years	Major	Degree
High School				
Univ. / College				
Univ. / College				
Military, Business Trade/Other				

REFERENCES

Give name, address and telephone number of three references who are not related to you and are not previous employers.

EMPLOYMENT HISTORY

Your present or most recent employer:

Company Name: _____

Starting Salary \$ _____

Address: _____ City & State: _____

From Mo. _____ Yr. _____

Supervisor: _____ Phone No.: _____

To Mo. _____ Yr. _____

Title of position held and duties performed: _____

Ending Salary \$ _____

Reason for leaving: _____

Previous Employer

Company Name: _____

Starting Salary \$ _____

Address: _____ City & State: _____

From Mo. _____ Yr. _____

Supervisor: _____ Phone No.: _____

To Mo. _____ Yr. _____

Title of position held and duties performed: _____

Ending Salary \$ _____

Reason for leaving: _____

Any Additional Employers

Company Name	Position	Start/End Dates	Ending Salary	Reason for Leaving

SPECIAL SKILLS AND QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment or other experience.

List below any other information or remarks that you wish to have considered as part of your application for employment.

Please read the following statements before signing below

I certify that the information provided in this application is true, to the best of my knowledge.

I understand that providing false or misleading information at any time during the application and interview process may lead to refusal to hire or discharge from the Company. If I become employed by the Company, I agree to follow all rules and regulations of the Company as they develop and change.

I allow the Company to conduct investigations on me, my background and my performance, and am aware that such investigations will become a part of my employment record. With this, I authorize the Company to speak with my acquaintances, personal and professional, to gather information about me.

I authorize all former employers and references to provide any information about me to the Company, and release them of liabilities and damages of all kinds for providing this information. I authorize the Company to verify the accuracy of the information within this application. I also authorize the release of my educational transcripts to the Company for education verification purposes.

I release DeNyse Companies from liability for collecting information about me and using it to make employment decisions.

(If there is a particular employer you do not wish us to contact, please indicate which one and why.)

DRUG –FREE WORKPLACE POLICY NOTICE TO JOB APPLICANT

It is our policy that all employees are prohibited from the unlawful manufacture, distribution, dispensation, possession, use of or impairment from a controlled substance, including alcohol, during working hours, while on duty, or while operating Company vehicles or equipment. Testing for controlled substances is done in various circumstances, including random, reasonable suspicious, post-accident, and pre-employment (for applicants offered a position). The DeNyse Companies' Drug and Alcohol Policy is available in its entirety in the Company Handbook, and can also be requested from the Human Resources Dept. I understand and agree that as a condition of employment at DeNyse Companies', I voluntarily submit to pre-employment drug testing, and I agree to follow, without reservation, the Drug-Free Workplace Policy.

EMPLOYMENT AND SEPARATION STATEMENT

I understand that there is a 60 day introductory period for new hires, during which time work performance is closely reviewed. I further understand and agree that, if hired, my employment is for no definite period and may be terminated at any time, with or without prior notice, at the will of the Company or myself.

Signature

Date