

EMPLOYMENT APPLICATION

Each question should be answered completely and accurately. No action will be taken on this application until all questions have been answered and the application has been signed and dated. Verification of eligibility to work in the U.S. will be required if an employment offer is made.

Date of Application				
Name	Middle Name	Last Name		
Other First and Last Names Used				
Address		City	ST _	Zip
Primary Phone Second	dary Phone	E-mail		
Position(s) applying for:				
What is your desired salary range or hourly ra	ate of pay: \$	per		
Referral source:	Have you applie	d here before? Yes N	lo If yes, gi	ve date:
Are you available to work; ☐ Full Time ☐ Pa	rt Time 🛭 Shift Work 🔲 🛚	「emporary		
Are you over the age of 18? Yes No	Are you eligible to w	ork in the United States?	Yes No	
Are you fluent in a foreign language (if applical	ble)? Yes No What la	nguage?		
Are you currently employed? Yes No	Dates available for w	ork:		
EDUCATION INFORMATION				
Name and Location of School		Did you gra	duate? De	gree / Certification
High School / GED		Yes N	lo	
Trade School		Yes N	o	
College		Yes N	o	
Graduate		Yes N	o	
SKILLS AND QUALIFICATIONS Summarize experience, skills, special training, are applying.	licenses, or certifications tha	t may assist you in perforr	ning the po	sition for which you

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REFERENCES

Please list name and telephone number of three professional references who are not related to you and that you have known for at least one year. Include at least one previous supervisor. Please provide the best telephone number to reach each contact.

Name	Company	l elephone Rela	tionship to	You	& Yea	rs Know
						
EMPLOYMENT HIS Please complete every space	=	recent employer, provide the following inform	mation:			
Employer		City & State				
Date of Employment: From	:// To:	_// Position Held				
		May we contact for re				Later
		Supervisor Email:				
		Ending Salary: \$				
Responsibilities:						
Reason for Leaving:						
Trince did you like reast asset						
Employer		City & State				
Date of Employment: From	: / / To:	_// Position Held				
Supervisor:						Later
		Supervisor Email:				
		Ending Salary: \$				

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EMPLOYMENT HISTORY (CONTINUED)

Employer	City & State	
Date of Employment: From:// To://	Position Held	
Supervisor:	May we contact for reference? Yes No	Later
Supervisor Direct Phone:	Supervisor Email:	
Starting Salary: \$	Ending Salary: \$	
Responsibilities:		
Reason for Leaving:		
What did you like most about your position?		
What did you like least about your position?		
MILITARY SERVICE RECORD		
Branch of Service:		· · · · · · · · · · · · · · · · · · ·
Discharge date:/ Discharge Rank:		
List any additional information you would like us to consider:		

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APPLICATION STATEMENT

AUTHORIZATION

I understand that SENT Topeka is not making an employment offer at this time. I certify that the information in this application is correct to the best of my knowledge. I understand that any misrepresentation or omission of any fact in my application, resume, or any other materials, or during interviews is grounds for disqualification from further consideration for employment or for termination, if employed.

I authorize SENT Topeka to contact any company, institution, or individual it deems appropriate to investigate my employment history, character, qualifications, credit history, driving record, and other relevant information, if job-related. I give my full consent for all contacted individuals, including current or former employers, to provide information concerning this application, and I waive my right to bring any cause of action against these individuals for any and all liability for damages arising from furnishing the requested information to SENT Topeka. I acknowledge that a facsimile or photocopy of this form is as valid as the original.

Offers of employment are contingent upon finalizing pre-employment actions, which may include: drug test and/or physical examination, or other items may be required. SENT Topeka may withdraw an offer of employment any time for any reason prior to the original agreed upon start date, or after should results come back later.

I understand that this application is current for 60 days. At the conclusion of this time, if I have not heard from SENT Topeka and still wish to be considered for employment, it will be necessary to complete a new application.

I understand that if I am hired, my employment at SENT Topeka is "at will" and may be terminated by myself or by them at any time, with or without cause or notice, for any reason or for no reason. I understand that no representative of SENT Topeka has the authority to make any assurance to the contrary.

Signature:	Date: _	

For purposes of this document, a typed signature will serve as the official signature

EQUAL EMPLOYMENT OPPORTUNITY COMPLIANCE

Clients of Scott Human Resources that are required by law to extend equal employment opportunities do so as required. Applicants are considered regardless of race, color, national origin, religion, gender, age, martial status, veteran status, medical condition, disability, or any other legally protected status. Equal access to the hiring process, services, and employment is available to all individuals. Applicants requiring accommodations to the application and/or interview process should contact the human resource representative.

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