# Michaelson, Connor & Boul

#### APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

Position Applying for:			Date:			
Last Name	First Name			Middle		
Address	City State			Zip Code		
Telephone Number:			Social Secu	rity Number:		
	(PLEA.	SE PRINT)				
Have you ever filed an applicat	ion with us before?			Yes	No	
		If Yes, give	date:			
Have you ever been employed with us before?				Yes	No	
		If Yes, give	date:			
Are you currently employed?			<del></del>	Yes _	No	
May we contact your present employer?				Yes	No	
Can you lawfully be employed in this country?  Proof of citizenship or immigration status will be required upon employment.				Yes	No	
On what date would you be ava	ilable for work?					
Are you available to work:	Full Time Part Time	Temporary				
Are you currently on "lay-off" status and subject to recall?				Yes	No	
Can you travel if a job requires it?				Yes	No	
Are you able to perform the essential job functions of the job which you are applying, with or without accommodation?  Yes				No		
Have you been convicted of a felony within the last 7 years?				Yes	No	

## **EDUCATION**

	High School		Undergraduate College/University			Graduate Professional						
Years Completed	9	10	11	12	1	2	3	4	1	2	3	4
School Name and State							<u> </u>				,IL	
Diploma/Degree												
Major of Study												
Other (business/trade technical school)												
Subject of special study or research work:												
Special Training/Skills:  Do you have any commitments to another entity, business, or person that might affect your employment with our company? No Yes  If "yes", please explain:												
Indicate <b>professional</b> certification/memberships/organizations you belong to:												
1.       2.												
3												

#### **EMPLOYMENT EXPERIENCE**

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate, race, color, religion, gender, national origin, handicap or other protected status.

Employer	Dates Employed	Supervisor
		То
Address	Telephone Number	Hourly Rate/Salary
		Starting Final
Job Title		
Description of duties		
Reason for Leaving		
Employer	Dates Employed	Supervisor
		То
Address	Telephone Number	Hourly Rate/Salary
		Starting Final
Job Title		
Description of duties		
Reason for Leaving		
Employer	Dates Employed	Supervisor
		То
Address	Telephone Number	Hourly Rate/Salary
	•	Starting Final
Job Title	<u> </u>	
Description of Duties		
Reason for Leaving		

If you need additional space, please continue on a separate sheet of paper.

# PROFESSIONAL REFERENCES ONLY (NO PERSONAL)

Give name, telephone number, and company/title of three references:	
1	
2	
3	
Have you ever had any job-related training in the United States military? Yes No If yes, please describe:	
APPLICANT'S STATEMENT	
I certify that answers given herein are true and complete to the best of my knowledge.	initials
I authorize investigation of all statements contained in this application for employment as	
may be necessary in arriving at an employment decision.	initials
This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applicants are being accepted at that time.	
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I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the employee may resign at any time and the Employer may discharge Employee at any time with cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by the President of this organization.	
by the resident of this organization.	initials
Employee acknowledges and understands that employment may be contingent on successfully passing a criminal record background check, as some positions require the employee to have no criminal record. Employees in such positions will be required to retain a record devoid of crimes throughout their employment.	
	initials
In the event of employment or offer of employment, I understand that false or misleading information given in my application or interview(s) may result in immediate discharge. I understand that I am required to abide by all rules and regulations of the employer.	
	initials

EQUAL OPPORTUNITY EMPLOYER AFFIRMATIVE ACTION PLAN PARTICIPANT

### **Voluntary Applicant Data Record**

This company is an Equal Opportunity Employer. We do not discriminate in hiring or employment because of race, color, creed, national origin, sex, age, disability or veteran status. Various government agencies request statistical information regarding our hiring practices. Your cooperation in completing this section is completely voluntary. Any information gathered is strictly confidential. Your answers will in no way be used against you. Thank you for your cooperation.

Name:	
Please Specify Your Sex Check one	Please Specify Your Race Check all that apply
Male $\square$	
Female $\Box$	White
I choose not to disclose	Black or African American
	American Indian or Alaskan Native
Spanish/Hispanic/Latino Check one	Asian
No $\square$	Native Hawaiian or Pacific Islander
Yes	OR
I choose not to disclose	I choose not to disclose