



PLEASE PRINT

APPLICATION FOR EMPLOYMENT

ENTIRE APPLICATION MUST BE COMPLETE EVEN IF ACCOMPANIED BY A RESUME. Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify Human Resources Department.

Position(s) applied for _____ Date of application ____/____/____

Name _____

Address _____

Telephone # (____) _____ Mobile/Beeper/Other Phone # (____) _____ E-mail Address _____

If you are under 18 and it is required, can you furnish a work permit? Yes No

If no, please explain _____

Have you ever been employed here before? If yes, give dates and positions _____ Yes No

Are you legally eligible for employment in this country?..... Yes No

Date available for work..... ____/____/____ What is your desired salary? \$ _____

Type of employment desired Full-Time Part-Time Temporary Seasonal Intern

Are you able to meet the attendance requirements of this position? Yes No

Have you ever pled "guilty" or "no contest" to, a withheld judgement entered against you, or been convicted of a crime?..... Yes No

If yes, please provide date(s) and details _____

Answering "yes" to these questions does not constitute an automatic bar to employment. Factors such as the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Driver's license number if driving is an essential job function _____ State _____

EMPLOYMENT HISTORY

Provide the following information of your past four (4) employers, assignments or volunteer activities, starting with the most recent.

FROM	TO	EMPLOYER	TELEPHONE ()
STARTING JOB TITLE/FINAL JOB TITLE		ADDRESS	
IMMEDIATE SUPERVISOR NAME AND TITLE		SUMMARIZE THE NATURE OF WORK PERFORMED AND JOB RESPONSIBILITIES	
MAY WE CONTACT EMPLOYER <input type="radio"/> YES <input type="radio"/> NO			
REASON FOR LEAVING		HOURLY RATE/SALARY START \$ _____ PER _____ FINAL \$ _____ PER _____	
FROM	TO	EMPLOYER	TELEPHONE ()
STARTING JOB TITLE/FINAL JOB TITLE		ADDRESS	
IMMEDIATE SUPERVISOR NAME AND TITLE		SUMMARIZE THE NATURE OF WORK PERFORMED AND JOB RESPONSIBILITIES	
MAY WE CONTACT EMPLOYER <input type="radio"/> YES <input type="radio"/> NO			
REASON FOR LEAVING		HOURLY RATE/SALARY START \$ _____ PER _____ FINAL \$ _____ PER _____	
FROM	TO	EMPLOYER	TELEPHONE ()
STARTING JOB TITLE/FINAL JOB TITLE		ADDRESS	
IMMEDIATE SUPERVISOR AND TITLE		SUMMARIZE THE NATURE OF WORK PERFORMED AND JOB RESPONSIBILITIES	
MAY WE CONTACT EMPLOYER <input type="radio"/> YES <input type="radio"/> NO			
REASON FOR LEAVING		HOURLY RATE/SALARY START \$ _____ PER _____ FINAL \$ _____ PER _____	
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IMMEDIATE SUPERVISOR AND TITLE		SUMMARIZE THE NATURE OF WORK PERFORMED AND JOB RESPONSIBILITIES	
MAY WE CONTACT EMPLOYER <input type="radio"/> YES <input type="radio"/> NO			
REASON FOR LEAVING		HOURLY RATE/SALARY START \$ _____ PER _____ FINAL \$ _____ PER _____	

SKILLS AND QUALIFICATIONS

Summarize any training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

EDUCATIONAL BACKGROUND (IF JOB RELATED)

NAME AND LOCATION	NUMBER OR YEARS COMPLETED	DID YOU GRADUATE?		COURSE OF STUDY
		MAJOR	DEGREE	
HIGH SCHOOL				
COLLEGE				
OTHER				

PROFESSIONAL REFERENCES

NAME	TELEPHONE	NUMBER OF YEARS KNOWN
	()	
	()	
	()	

APPLICANT STATEMENT

I certify that all information I have provided in order to apply for and secure work with Alliance is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or a misrepresentation in any respect may constitute sufficient grounds (i) to cancel further consideration of this application, or (ii) for immediate termination of my employment with Alliance, regardless of when it is discovered.

I expressly authorize, without reservation, Alliance, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, résumé or job interview. I hereby waive any and all rights to claim I may have regarding Alliance, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that Alliance does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that, if I have not heard from Alliance and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

I understand that to the extent allowed by law, the Company reserves the right to (i) request that I submit to a drug test as condition of employment; and (ii) if I am hired, request that I submit to a drug and alcohol test during the course of my employment. I acknowledge that my refusal to submit to drug or alcohol testing when requested may be grounds for the withdrawal of any offer of employment by the Company or, subsequent to hire, the termination of my employment.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no employer or representative of Alliance is authorized to make any representations or assurances to the contrary and that no implied, oral or written agreement contrary to the foregoing express language is valid unless in writing and signed by Alliance's President.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ Date ____/____/____