

Personal Information

Personal Information	
Legal First Name as it appears on your Social Security Card .	John Diverson
Legal Last Name as it appears on your Social Security Card .	Dalusma
Email Address	johndiverson0@gmail.com
Address 1	418 lock rd
Address 2	45 apt
City	Deerfield Beach
Country	United States
State/Province*	Florida
Zip/Postal Code	33442
Primary Phone	(317) 998-0637
Secondary Phone	
General Information	
Have you ever worked for Afni, Inc or Afni Insurance Services before?	No
Are you bilingual?	Yes
If yes and applicable, which languages are you fluent in?	English
Employment History	
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Please enter all employment history. Employment history will be a factor in o	our hiring decision,
Please list your most recent employer first. To add additional employers, click the Add Employer button below. The Remove Last Employer will delete all entries for the last employer that you have entered.	
If you have no employment history, please choose N/A in the Employer Type dropdown.	
Previous Employer 1	
Employer Type	
Name of Employer* .	
Type of Industry*	
Position/Title*	
Country*	
State*	
City*	
Enter a valid city with correct spelling. Do not enter "Remote" as a city.	
Start Date*	
End Date*	
Reason for leaving this employer* .	
Harri Wa Cantant 24	
May We Contact?*	
CONSENT AND RELEASE TO AUDIO INTERVIEW RECORDING	
CONSENT AND RELEASE TO AUDIO INTERVIEW RECORDING THIS CONSENT	AND RELEASE IS STRICTLY VOLUNTARY. CONSIDERATION FOR THE POSITION IS NOT PREDICATED ON MY CONSENT TO

CONSENT AND RELEASE TO AUDIO INTERVIEW RECORDING THIS CONSENT AND RELEASE IS STRICTLY VOLUNTARY. CONSIDERATION FOR THE POSITION IS NOT PREDICATED ON MY CONSENT TO A RECORDED INTERVIEW. I, John Diverson Dalusma, hereby grant permission to Afni, Inc. to the rights of the likeness and sound of my voice as recorded without payment or any other consideration. I understand that my voice may be considered personal identifiable information, biometric information and/or fall within the protections of federal or state privacy laws. I also understand that this material may only be used for internal training purposes by Afni, Inc. or one of its subsidiaries or affiliates.

Afni, Inc. may make an audio recording of the interview and preservation thereof for the sole purpose of internal staff training. In addition to the interviewer, other Afni, Inc. personnel and agents may have access to review the recordings. The recording will be permanently deleted within thirty (30) days after the recording in accordance with Afni record retention policies.

By signing this release, I understand this permission signifies that audio recordings of me during the interview may be used only for Afni internal staff training purposes. This consent and release only apply to audio recordings collected as part of the interview.

By signing this release, I acknowledge that I have completely read and fully understand the above consent and release and agree to be bound thereby. With full understanding, I hereby release any and all claims against Afni, Inc., its subsidiaries, assigns and any of its personnel utilizing this reviewing this material.

Applicant Full Name John Diverson Dalusma

Street Address/P.O. Box 418 lock rd

City Deerfield Beach State Florida Zip Code 33442

Phone3179980637

 $Email\ Address john divers on 0@gmail.com$

religion, sex, age, national origin, disability, or any other protected characteristic as established by law. This policy of Equal Employment Opportunity applies to all policies and procedures relating to recruitment and hiring, compensation, benefits, termination, and all other terms and conditions of employment.

Please type your full legal name as you listed it on this application John Diverson Dalusma.

ELECTRONIC SIGNATURE: John Diverson Dalusma Accepted

Consent to Audio Interview Recording

eSignature

Electronic Signature

ELECTRONIC SIGNATURE NOTICE AND CONSENT

This notice is intended to provide you with important information required by the Electronic Signatures in Global and National Commerce Act (E-Sign Act).

Consent: By entering your name, you consent to submit your employment application and all related forms, documents and information electronically. You further consent to conduct any matters related to the recruiting, application, background check and/or onboarding process electronically. Typing your name in the textbox under or on a form, entering your login password, and clicking on "Submit", will constitute your electronic signature.

Right to Withdraw Your Consent: You have the right to withdraw your consent to receive disclosures and submit information electronically. If you choose to withdraw your consent, the application process will be terminated. You may withdraw your consent by contacting the Company, and typing in "Withdraw" in the textboxes for the Certification and Background Disclosure pages.

<u>Technical Requirements</u>: To use this online process and to access and retain electronic records, you will need Microsoft Internet Explorer 7.0 or 8. You must also have access to a printer and/or the ability to download information in order to keep copies of the electronic agreements and disclosures for your records.

Paper Copies of Electronic Records: If you wish to obtain a free copy of your electronic application and disclosure forms, you may click on the "print" link on the manage your application page.

<u>Updating contact information</u>: It is your responsibility to update the Company regarding any changes to your e-mail address or other contact information.

Applicant Statement

I hereby certify that all of the foregoing statements are true and complete. I agree to assume a continuing responsibility to disclose additional or new information, called for this Employment Application, but known to me only after this Application was completed, and understand that my failure to make such disclosure, and that false, incomplete or misleading information given on this Application, on any employment form, or in any interview, are grounds for terminating the employment process or, if discovered after employment, terminating employment.

I expressly agree to reimburse AFN-Afni for attorney fees, costs and expenses incurred in its successfully defending all or part of any state or federal court lawsuit that I may file against AFN-Afni and/or any individual in their capacity as an agent of AFN-Afni, arising out of or in connection with this Application, the hiring process and/or any employment that I accept at AFN-Afni. I also agree, as does AFN-Afni, to waive all rights to a trial by jury on any claim one may assert against the other in a court of law. Additionally, I agree that any claim that I may assert against AFN-Afni in a court of law shall be brought only in my individual capacity and not as a plaintiff or class member in a class or representative proceeding.

I understand that if I am employed, my employment will not be for a definite duration and can be terminated at any time by either AFN-Afni or myself. I further understand that none of AFN-Afni's personnel policies should be construed as a contract or as a guarantee of continued employment. No representative of AFN-Afni or its subsidiaries or affiliates, other than AFN-Afni's President, has authority to enter into or approve any agreement for employment for any specific period of time or to approve any agreement contrary to the foregoing.

Additionally, I understand that the invalidity or unenforceability of any particular provision of this Applicant Statement will not affect the Applicant Statement's other provisions, which are then to be applied as if the invalid or unenforceable provision were omitted.

Please type your full legal name as you listed it on this application John Diverson Dalusma.

John Diverson Dalusma
ELECTRONIC SIGNATURE: Accepted

I testify that this statement is true to the best of my knowledge.