

Focus Corp
EMPLOYMENT APPLICATION

Please complete the entire application.

1. Employer Information

Employer: Focus Corp
Address: 444 Victors Valiant
City/State/ZIP: Ann Arbor, Michigan 48104
Telephone: 444-426-4968

It is the policy of Focus Corp to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status.

2. Applicant Information

Applicant Full Name: JOHN DOE
Home Address: 1830 ARTIQUE RD
City/State/ZIP: TOPANGA, CA 90290
Number of years at this address: 4
Daytime phone: 310-248-8573 Evening phone:
Mobile phone:
Social Security Number: 333-44-5555
Driver's License (State/Number): Y521793367692

3. Emergency Contact

Who should be contacted if you are involved in an emergency?

Contact Name: JANE DOE
Relationship to you: WIFE
Address: 1830 ARTIQUE RD
City/State/ZIP: TOPANGA, CA 90290
Daytime phone: Evening phone:

4. Job Position Applied For: OPERATIONS COORDINATOR
Full or Part Time? FULL TIME

5. Salary Desired: \$ 85,000 per YEAR

6. Who referred you to our company? ACME
Do you have any friends or relatives who work here? If yes, please list here:

7. Have you applied to our company previously? Yes ☒ No
If yes, when?

8. Are you at least 18 years old? ☒ Yes No

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9. If hired, are you able to submit proof that you are legally eligible for employment in the United States? X Yes _____ No
10. Are you able to perform the essential functions of the job position you seek with or without reasonable accommodation? X Yes _____ No

What reasonable accommodation, if any, would you request?

11. Applicant's Skills

Check those skills that you have. List any other skills that may be useful for the job you are seeking. Enter the number of years of experience, and circle the number which corresponds to your ability for each particular skill. (One represents poor ability, while five represents exceptional ability.)

Ability

or

Skill Years of Experience Rating

[] Customer service 4 _____ 1 2 3 4 5

1 2 3 4 5

1 2 3 4 5

12. Applicant Employment History

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue on the back page of this application.

Employer Name: _____
Supervisor Name: _____
Address: _____
City/State/ZIP: _____
Job Duties: _____
Reason for Leaving: _____
Dates of Employment (Month/Year): _____

Employer Name: _____
Supervisor Name: _____
Address: _____
City/State/ZIP: _____
Job Duties: _____
Reason for Leaving: _____
Dates of Employment (Month/Year): _____

Employer Name: _____
Supervisor Name: _____

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Address: _____
City/State/ZIP: _____
Job Duties: _____
Reason for Leaving: _____
Dates of Employment (Month/Year): _____

13. Applicant's Education and Training

College/University Name and Address

UNIVERSITY OF MICHIGAN

Did you receive a degree? ☒ Yes _____ No _____ If yes, degree(s) received: BUSINESS

High School/GED Name and Address

RIDGEMONT

Did you receive a degree? ☒ Yes _____ No _____

Other Training (graduate, technical, vocational):

Please indicate any current professional licenses or certifications that you hold:

Awards, Honors, Special Achievements:

Military Service:

_____ Yes ☒ No

Branch: _____

Specialized Training: _____

14. References

List any two non-relatives who would be willing to provide a reference for you.

Name: _____
Address: _____
City/State/ZIP: _____
Telephone: _____
Relationship: _____

Name: _____
Address: _____
City/State/ZIP: _____
Telephone: _____
Relationship: _____

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15. Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:

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CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Focus Corp to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its _____, the employment relationship will be "at-will." In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative, or employee of Focus Corp, except in a specific written contract of employment signed on behalf of the organization by its _____, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

JOHN DOE

APPLICANT SIGNATURE DATE