APPLICATION FOR EMPLOYMENT



Please answer all questions. Resumes are not a substitute for a completed application.

I UNDERSTAND THAT NEITHER THIS APPLICATION NOR ANY COMMUNICATION BY A MANAGEMENT REPRESENTATIVE IS INTENDED TO CREATE OR DOES CREATE A CONTRACT OF EMPLOYMENT, OFFER, OR PROMISE OF EMPLOYMENT A DEFINITE TERM. I ACKNOWLEDGE THAT IF HIRED BY THE COMPANY, EMPLOYMENT IS ON AN AT-WILL BASIS IN ACCORDANCE WITH STATE LAW. THIS MEANS THE COMPANY IS FREE TO TERMINATE MY EMPLOYMENT AT ANY TIME, WITH OUT WITHOUT CAUSE OR ADVANCE NOTICE, IN ACCORDANCE WITH STATE LAW, AND ACCEPTANCE OF EMPLOYMENT IS NOT A CONTRACT OF EMPLOYMENT FOR ANY SPECIFIED TIME. SIMILARLY, I AM FREE TO TERMINATE MY EMPLOYMENT WITH THE COMPANY AT ANY TIME FOR ANY REASON. THIS AT-WILL PROVISION MAY BE MODIFIED OR WAIVED ONLY IN A WRITTEN AGREEMENT SIGNED BY AN AUTHORIZED REPRESENTATIVE OF THE COMPANY AND ME. I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF THE COMPANY AND I UNDERSTAND THAT THE COMPANY HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL OR ITS ARBITRATION POLICY, IF ANY.

We are an equal opportunity employer. Applicants are considered for positions without regard to race, religion, sex, national origin, age, disability, or any other consideration made unlawful by applicable federal, state, or local laws.

Position Applied For	Name			
Telephone Number()	Social Security #:			
Present Address	How long have you lived there//			
Previous Address	How long have you lived there//			
Desired Salary/Hourly Rate	-			
If under the age of 18, can you produce the necessary work ce	ertificate at the time of employment? Yes 🔲 No 🗀]		
Type of employment desired? Full-time Part-time				
Are you willing to work overtime? Yes 🔲 No 🔲	Date you can start work if hired			
Have you previously applied for employment with this Compa	nny? Yes No No			
If yes, when and where did you apply?				
Have you ever been employed by this company? Yes	No 🔲			
If yes, provide dates of employment, location, and reason for s	separation from employment.			
For NC and KS applicants only: Do NOT include convictions the expunged, or convictions that resulted in referral to a diversion		, or		
Have you ever plead guilty or no contest to, or been convicted listed above? Yes No	d of any criminal offense other than the applicable exc	eptions		
Have you ever been arrested for any matters for which you are	out on bail or on your own recognizance pending trial?	Yes No No		
CRIMINAL OFFENSES ONLY: If you answered yes to either o accordance with the above instructions so that individual circu		and explain in		

Criminal convictions or arrests will not automatically disqualify an applicant from a particular job. The company will consider the nature of the crime, its seriousness, whether the conviction(s) substantially relates to the position's functions and qualifications, the frequency of convictions, the applicant's age at time of conviction, the time elapsed since the date of conviction or completion of jail sentence, the applicant's entire work and educational history, and employment references and recommendations.

yes, please provide	ed an act of violence in the the date(s) and explain so rom employment).	that individual circ	umstances can be co		
	al skills that you feel quali				
EDUCATION	SCHOOL NAME AND LOCATION	COURSE OF STUDY	GRADUATED?	# OF YEARS COMPLETED	DEGREE/MAJOR
High School					
College					
Bus./Tech./ Trade or Post College					
or last employer fir name and business	CE: Please list the names st. Account for all periods references. You may inclu e to completely respond to	of time including a ide any verifiable w	ny period of unempl ork performed on a	oyment. If self-er volunteer basis,	mployed, supply firm internships, or military
MPLOYER					
ame		Address			Type of Business
lephone ()_					
ates Employed: FR0	DM/_	TO _	//		
b Title		Dutie	S		
		Super	visor's Name		
ay we contact Yes	No If no, why	not?			
ages: START		END		_ Reason for le	aving
hat will this employ	er say was the reason you	r employment tern	ninated?		

Name	Address	Type of E	Business
Telephone ()			
		/ /	
		sor's Name	
May we contact Yes No	If no, why not?		
Wages: START	END	Reason for leaving	
What will this employer say was t	he reason your employment termin	nated?	
How much notice did you give wh	en resigning? If none, explain		
EMPLOYER			
Name	Address	Type of E	Business
Telephone ()			
Dates Employed: FROM	_/ TO	/	
Job Title	Duties _		
	Supervis	sor's Name	
May we contact Yes 🔲 No 🛭	If no, why not?		
Wages: START	END	Reason for leaving	
What will this employer say was t	ne reason your employment termin	nated?	
How much notice did you give wh	en resigning? If none, explain		
Please fully explain all gaps in your	r ampleyment history in excess of s	one month.	
r lease rully explain all gaps in you	employment history in excess or c	ле попи.	
Have you ever been terminated o	r asked to resign from any job?	Yes No	
Has your employment ever been t	terminated by mutual agreement?	Yes No No	

REFERENCES: Please list the names of additional work-related references we may contact. Individuals with no prior work experience may list school or volunteer related references.

NAME	POSITION	COMPANY	WORK RELATIONSHIP	TELEPHONE

Please list the names of personal references (not previous employers or relatives) who you know well that we may contact).

NAME	POSITION	COMPANY	WORK RELATIONSHIP	TELEPHONE

APPLICANT CERTIFICATION

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license and automobile liability insurance in an amount equal to the minimum required by the state in which I reside.

I understand that the company may now have, or may establish, a drug-free workplace or drug and/or alcohol testing program consistent with applicable federal, state, and local law. If the company has such a program and I am offered a conditional offer of employment, i understand that if per-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. I also understand that all employees of the location, pursuant to the company's policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests a condition of continual employment and I agree to undergo alcohol and drug testing consistent with the company's policies and applicable federal, state, and local law.

If employed by the company, I understand and agree that the company, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, an computers) and, in certain circumstances, my personal property.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign a confidentiality, non-compete, and/or conflict of interest statement.

I certify that all the information on this application, resume, or any supporting documents, I may present during any interview is an and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

I authorize the company or its agents to confirm all statements contained in this application and/or resume as it relates to the position I am seeking and to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation.

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. I hereby release, discharge and hold harmless, to the extent permitted by federal, state and local law, any party delivering information to the company or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I any have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the company and its representative for seeking such information and all other persons, corporations, or organizations furnishing such information.

If hired by this company, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this Company. I also understand this company employs only individuals who are legally eligible to work in the United States by this company. THIS APPLICATION WILL BE CONSIDERED ACTIVE FOR A MAXIMUM OF SIXTY (60) DAYS. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY.

I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE, ACCURATE, AND COMPLETE.

APPLICANT SIGNATURE	DATE
legal guardian constitutes acknowledgment of the applicant and the	e signed by the applicant's parent or legal guardian. Signature by the applicant's parent or e parent or legal guardian that the company, to the extent permitted by federal, state, and local ctions of property without notice, and communicate screen results to company personnel who
PARENT/LEGAL GUARDIAN	WITNESS
DATE	 DATE

THANKS! YOU'RE ALL SET.



I AM AVAILABLE FOR THE FOLLOWING (CHECK APPLICABLE BOXES): I am fully available to work any hours (mornings, evenings, weekends and holidays) Mark the times that you are available to work. MONDAY TUESDAY WEDNESDAY THURSDAY **SATURDAY** FRIDAY 8:00 AM - 12:00 PM 12:00 PM - 4:00 PM П 4:00 PM - 8:00 PM П П 8:00 PM -12:00 AM Would you be willing to work a split shift? Never 1 day 2 or more Are you available/willing to work weekends? \Boxed Yes \Boxed No I can begin working on: I can work through/until:_____ Comments:

APPLICANT SIGNATURE

^{***}This form is NOT a schedule request form. If you are aware of specific dates you cannot work at this time, please indicate them below. If you are hired and change your availability after your hire date, Anomaly Squared may or may not be able to work with your changes. You need to submit a new Availability Form to request changes and for approval purposes. ***

LSURVEY

Date:	Name:
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Instructions: Please indicate your level of agreement with the statements listed below.

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
 I listen carefully when others are speaking to me. 	0	0	0	0	0
2. I am good at solving problems when they arise.	0	0	0	0	0
3. I consider myself a dependable person.	0	0	0	0	0
4. I consider myself to be a positive person.	0	0	0	0	0
5. I enjoy helping others.	0	0	0	0	0
6. When others are speaking, I am concentrating more on what I want to say rather than what the person is saying.	0	0	0	0	0
7. I do not like to deal with problems at work.	0	0	0	0	0
8. I usually dwell on the negative aspects of life, rather than the positive.	0	0	0	0	0
9. I don't really see the benefit in assisting other people.	0	0	0	0	0
10. I don't consider myself to be a trustworthy person.	0	0	0	0	0

11. Name 3 of your best qualities. Please explain.	
12. Name 3 of your worst qualities. Please explain.	
13. What do you consider to be the best work environment possible in order for you to do your best work? Please explain.	

Thanks!