

PHONE: 847-720-4466

EMPLOYMENT APPLICATION

PLEASE PRINT OR TYPE			Today's I	Date: _				
First Name		Last Name			Preferred N	ame/Nickname		
Street Address	Apt # City		State		Zip Code			
Home Phone	Alternate/Work Phone			Email Address				
PLEASE PLACE A CHECK BY YOU	R RESPONSE O	R PROVIDE THE	E APPROPRI	ATE INFO	RMATION			
Are you interested in:		<u> </u>	Full Time		art Time	Temporary		
How did you hear about the position	ion? Classified Ad		Friend (Nam	e) R	Radio	Internet		
Desired Pay: Hourly Pay	\$		nual Pay	\$		\$		
When are you able to start work?	Date:							
Position desired:								
PLEASE CHECK YES OR NO TO THE	FOLLOWING:							
Are you authorized to work in the United States? Yes No								
Federal law requires that employers hire only individuals who are authorized to be lawfully employed in the United States. In compliance with these laws, Caseys will verify the status of every individual offered employment with the Company. In this connection, all offers of employment are subject to verification of the applicant's identity and employment authorization, and it will be necessary for you to submit such documents as are required by law to verify your identification and employment authorization.								
Are you under 18 years of age?				Yes	No			
If yes, can you furnish a work permi			Yes	No				
Are you capable of performing the essential functions of the job for which you are applying with or without a reasonable accommodation			? —	Yes	No			

PLEASE LIST YOUR WORK EXPERIENCE BELOW (MOST RECENT JOB FIRST)

	COMPANY NAME			YOUR POSITION and TITLE				
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FROM	NO. & STREET			SUPER	VISOR'S NAME, TITLE and POSITION			
TROW	NO. GOTTLET			OOI LIK	SUPERVISOR'S NAME, TITLE and POSITION			
/								
Month Year	CITY STATE ZIP CODE			CUREDVICORIO TEL EDUONE NUMBER				
	CITY	STATE	ZIF CODE	SUPER	SUPERVISOR'S TELEPHONE NUMBER			
	TYPE OF BUSINES	9	STARTING PAY		FINAL PAY			
	THE OF BOSINES	O			TIVALIAI			
			\$		\$			
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Month Year			VOLUNTAR	ARY				
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	COMPANY NAME			YOUR POSITION and TITLE				
FROM	NO. & STREET			SUPERVISOR'S NAME, TITLE and POSITION				
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Month Year								
	CITY	STATE	ZIP CODE	SUPER	ISOR'S TELEPHONE NUMBER			
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	BRIEFLY DESCRIBE YOUR MAJOR DUTIES AND REASON(S) FOR TERMINATION			<u>IINATION</u>				

	COMPANY NAME			YOUR POSITION and TITLE			
FROM /	NO. & STREET			SUPERVISOR'S NAME, TITLE and POSITION			
Month Year	CITY STATE		ZIP CODE	SUPERVIS	OR'S TELE	PHONE NUMBER	
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	TYPE OF BUSINE	SS	STARTING PAY	1	FINAL PAY	,	
			\$		\$		
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Month Year	()			VOLUNTARY INVOLUNTARY			
	BRIEFLY DESCRIBE YOUR MAJOR DUTIES AND REASON(S)						
EDUCATION:							
NAME AND ADDRESS OF SCHOOL			MAJOR SUBJECT		YOU JATE?	TYPE OF DEGREE OR DIPLOMA	
HIGH SCHOOL OR PREP							
COLLEGE							
COLLEGE OR GRADUAT	E						
OTHER							
REFERENCES: Plea	se list two pr	ofessional refe	rences				
NAME RELAT		ATIONSHIP	TIONSHIP COMPANY		PHON	PHONE/ALTERNATE PHONE	

PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION

I have submitted the attached form to the company for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the company to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from the Company's employ.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with the Company in the position I am seeking.

I understand that this application is not an employment contract for any specific length of time between the Company and me, and that in the event I am hired, my employment will be "at will" and either the Company or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy and the like, distributed by the Company to its employees is intended to or can create an employment contract, an offer of employment or any obligation on the Company's part. The Company may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any benefit, policy practice, condition or process affecting its employees.

<u>References</u>: I hereby authorize the company and its agents to make such investigations and inquiries into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquires connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications.

Temporary/Contract Employment: If employed as a temporary or contract employee, I understand that I may be an employee of the company and not of any client. If employed, I further understand that my employment is not guaranteed for any specific time and may be terminated at any time for any reason. I further understand that a contract will exist between the company and each client to whom I may be assigned which will require the client to pay a fee to the company in the event that I accept direct employment with the client, I agree to notify the company immediately should I be offered direct employment by a client (or by referral of the client to any subsidiary or affiliated company), either for a permanent, temporary (including assignments through another agency), or consulting positions during my assignment or after my assignment has ended.

SIGNED:	DATE: