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# **Employment Application**

## **Applicant Information**

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

*City* \_\_\_\_\_ *State* \_\_\_\_\_ *ZIP Code* \_\_\_\_\_

**Phone:** \_\_\_\_\_ **START DATE:** \_\_\_\_\_ **Birth Date:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_ **REFERRED BY:** \_\_\_\_\_

What is your Withholding Allowance on your W-4?  Single  Married  Married, but withhold at higher Single rate

Social Security Number: \_\_\_\_\_ Total number of allowances you are claiming on W4? \_\_\_\_\_

Are you a citizen of the United States?      YES      NO      Are you authorized to work in the U.S.?      YES      NO

Have you ever been convicted of a felony? YES  NO  Legal Form of ID \_\_\_\_\_

ID Number: \_\_\_\_\_ Date of Expiration: \_\_\_\_\_

## Education

I have a:  High School Diploma       GED       Associates Degree       Bachelor's Degree       Other

*Describe Other:* \_\_\_\_\_

## **Previous Employment**

## Previous Employment

Company: **FROM:** **TO:**

**Company:** [REDACTED] **FROM:** [REDACTED] **TO:** [REDACTED]

Employee Availability

## **Employee Availability**

Select your availability, then mark the days you are available below:

## **Disclaimer and Signature**

*I authorize the release of my personal information to Joteye, Inc. I understand that Joteye, Inc. will have my consent to do a legal status check, a criminal background check, and/or a 5-panel drug test. I state that I am in good health with no physical or mental limitations to do the job I am applying for. I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_