



# ALLTECH INTERNATIONAL

Employment Application  
PHONE/FAX: 703.506.1222

## APPLICANT INFORMATION

Last Name		First Name		M.I.		Date	
Street Address						Apartment/Unit #	
City				State		ZIP	
Phone		Mobile		E-mail Address			
Date Available		Social Security No.		Driver License No. & State		Desired Salary	
Position Applied for							
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?				
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain				

\* DO NOT ANSWER ANY OF THE QUESTIONS IN THIS FORM AREA UNLESS THE EMPLOYER HAS MARKED THE \* PRECEDING A QUESTION THEREBY INDICATING THAT THE INFORMATION IS REQUIRED FOR A BONA FIDE OCCUPATIONAL QUALIFICATION OR DICTATED BY NATIONAL SECURITY LAWS, OR IS NEEDED FOR OTHER LEGALLY PERMISSIBLE REASONS.

THE AGE DISCRIMINATION ACT OF 1967 PROHIBITS DISCRIMINATION ON THE BASIS OF AGE WITH RESPECT TO INDIVIDUALS WHO ARE AT LEAST 40 BUT LESS THAN 70 YEARS OF AGE.

<input checked="" type="checkbox"/> *Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	<input checked="" type="checkbox"/> *If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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## EDUCATION

High School				Address			
From		To		Graduation Date		Degree	
College				Address			
From		To		Graduation Date		Degree	
Other				Address			
From		To		Graduation Date		Degree	

## BUSINESS REFERENCES

Please list three Supervisor, Manager or Team Lead references.

1. Full Name			Relationship	
Company			Phone	
Email				
2. Full Name			Relationship	
Company			Phone	
Email				
3. Full Name			Relationship	
Company			Phone	
Email				

**COWORKER REFERENCES**

Please list three professional references.

1. Full Name		Relationship	
Company		Phone	
Email			
2. Full Name		Relationship	
Company		Phone	
Email			
3. Full Name		Relationship	
Company		Phone	
Email			

**PREVIOUS EMPLOYMENT**

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

**MILITARY SERVICE**

Branch	From	To
Rank at Discharge	Type of Discharge	



If other than honorable, explain

**DISCLAIMER AND SIGNATURE**

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION AND CONSUMER REPORTS WHICH I UNDERSTAND MAY INCLUDE INFORMATION REGARDING MY CREDIT WORTHINESS, CREDIT CAPACITY, CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, OR MODE OF LIVING. THIS REPORT MAY BE COMPILED WITH INFORMATION FROM CREDIT BUREAUS, COURT RECORD REPOSITORIES, DEPARTMENT OF MOTOR VEHICLES, PAST OR PRESENT EMPLOYERS AND EDUCATIONAL INSTITUTIONS, GOVERNMENT OCCUPATIONAL LICENSING OR REGISTRATION ENTITIES, BUSINESS OR PERSONAL REFERENCES, AND ANY OTHER SOURCE REQUIRED TO VERIFY INFORMATION. I UNDERSTAND THAT EMPLOYMENT MAY BE CONTIGENT UPON PASSING A DRUG SCREENING TEST. I ALSO UNDERSTAND THAT MY CONTINUED EMPLOYMENT MAY BE BASED ON THE RESULTS OF FUTURE DRUG SCREENING TESTS AND ANY OTHER FUTURE BACKGROUND CHECKS. I HEREBY RELEASE EMPLOYERS AND PERSONS NAMED IN MY APPLICATION FOR ALL LIABILITY FROM ANY DAMAGES ON ACCOUNT OF HIS/HER FURNISHING SAID INFORMATION. I AUTHORIZE THE RELEASE OF THIS INFORMATION BY THE APPROPRIATE AGENCIES TO ALLTECH INT'L, INC. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS IS CAUSE FOR DISMISSAL. I ALSO UNDERSTAND THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PREVIOUS NOTICE.

\*IF "RESUME" IS REFERENCED, IT BECOMES PART OF THIS APPLICATION FOR EMPLOYMENT

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**

THIS FORM HAS BEEN DESIGNED TO COMPLY WITH STATE AND FEDERAL FAIR EMPLOYMENT PRACTICE LAWS PROHIBITING DISCRIMINATION ON THE BASIS OF AN APPLICANT'S SEX OR MINORITY STATUS. QUESTIONS DIRECTLY OR INDIRECTLY REFLECTING SUCH STATUS HAVE BEEN INCLUDED ONLY WHERE NEEDED TO DETERMINE A BONA FIDE OCCUPATIONAL QUALIFICATION OR FOR OTHER PERMISSIBLE PURPOSES, SUCH QUESTIONS ARE APPROPRIATELY NOTED ON THE APPLICATION.

ALLTECH INT'L PROVIDES EQUAL EMPLOYMENT OPPORTUNITIES (EEO) TO ALL EMPLOYEES AND APPLICANTS FOR EMPLOYMENT WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, DISABILITY OR GENETIC. IN ADDITION TO FEDERAL LAW REQUIREMENTS, ALLTECH INT'L COMPLIES WITH APPLICABLE STATE AND LOCAL LAWS GOVERNING NON-DISCRIMINATION IN EMPLOYMENT IN EVERY LOCATION IN WHICH THE COMPANY HAS FACILITIES. THIS POLICY APPLIES TO ALL TERMS AND CONDITIONS OF EMPLOYMENT, INCLUDING RECRUITING, HIRING, PLACEMENT, PROMOTION, TERMINATION, LAYOFF, RECALL, TRANSFER, LEAVE OF ABSENCE, COMPENSATION AND TRAINING.