

Office use only

Interviewer:

P

V

A



STAIRMASTERZ Application For Employment

Statement of Policy: Employment with STAIRMASTERZ is based on individual merit and qualifications. Employment opportunities are provided without regard to race, color, sex, age, marital status, religion, national origin, disability, or veteran status. Only United States citizens or aliens who have a legal right to work in the United States are eligible for employment. You will be asked to submit documentation verifying your legal right to work in the United States and your identity.

PLEASE COMPLETE THE FOLLOWING: (Please print legibly)

Social Security Number: _____

First Name: _____ Middle Initial: _____ Nickname: _____

Last Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

E-Mail: _____

Home Phone: _____ Cell Phone: _____

Emergency Phone: _____ Contact Name: _____

Transportation: All employees must be on time for every position. You will be required to demonstrate a consistent, reliable means of arriving to work on time.

Are you 18 years of age or older? Yes ___ No ___

If you are under 18, can you furnish a work permit? Yes ___ No ___

Have you ever filed an application with STAIRMASTERZ before? Yes ___ No ___ If "yes", when? _____

Education Level: High School ___ GED ___ College ___ Trade School ___

What shift do you prefer to work? Mornings ___ Evenings ___ Nights ___

Are you available for weekend work: Yes ___ No ___

How did you hear about STAIRMASTERZ: _____

What is the minimum hourly pay you are willing to accept: _____

What geographic area are you willing to work: _____

Have you ever been convicted of a felony or misdemeanor? Yes ___ No ___

(NOTE: A conviction will not necessarily bar you from employment. Each conviction will be judged on its own merits with respect to time, circumstances, and seriousness.)

Have you ever been discharged or suspended from employment? Yes ___ No ___

If you answered "yes", please explain: _____

Employment History (1):

Start Date	End Date	Company Name, Address, & Phone Number	Position Held & Salary	Supervisor Name	Reason For Leaving

Are you eligible for re-hire at the above company: Yes ___ No ___

Employment History (2):

Start Date	End Date	Company Name, Address, & Phone Number	Position Held & Salary	Supervisor Name	Reason For Leaving

Are you eligible for re-hire at the above company: Yes ___ No ___

Employment History (3):

Start Date	End Date	Company Name, Address, & Phone Number	Position Held & Salary	Supervisor Name	Reason For Leaving

Are you eligible for re-hire at the above company: Yes ___ No ___

Other Work Related Comments: _____

EEOC

STAIRMASTERZ is an Equal Opportunity Employer: we participate in the Equal Employment Opportunity Commissions Act. Employment with STAIRMASTERZ is based on individual merit and qualifications. Employment opportunities are provided without regard to race, color, sex, age, marital status, religion, national origin, disability, or veteran status.

This form is strictly voluntary; you have the option to complete/not complete the following information. If you choose to complete the information requested below it will not have any bearing on the hiring decision for employment opportunities with advantage.

EEOC Voluntary Information Form

Date Of Birth: _____ Sex: Male _____ Female _____

Race: American Indian: _____ Alaskan: _____ Asian: _____ Pacific Islander: _____ Hispanic: _____

Black (Not of Hispanic Origin): _____ White (Not of Hispanic Origin): _____ Unknown – Other : _____

For office use only.

Interviewer Comments: _____

References

Please provide two references we can contact. Professional references are preferred however personal references are acceptable after you have listed your professional references first.

Name: _____

Name: _____

Address: _____

Address: _____

City: _____ State: _____

City: _____ State: _____

Zip Code: _____

Zip Code: _____

Telephone Number: _____

Telephone Number: _____

How many years have you known this reference: _____

How many years have you known this reference: _____

Notice to all applicants:

This employer complies with the American Disabilities Act of 1990. During the interview process you may be asked questions concerning your ability to perform related functions. If you are given a conditional offer of employment, you may be required to complete a post job offer medical history questionnaire and/or undergo a medical examination. If required, all entering employees in the same job category will be subject to the same medical questionnaire and/or examination and all information will be kept confidential and in a separate file.

I certify that all of the information furnished on this application is true, complete and current. I understand and agree that any falsification, misrepresentation, misleading statements, or omission of the fact on either the application or during the pre-hire or post-hire process will be sufficient reason for (1) not being offered employment: (2) dismissal at any time (If I am employed).

I authorize STAIRMASTERZ to release the information contained to background investigations to other firms or person upon request. I release STAIRMASTERZ, any agency, employer, school, or individual, from liability as a result of such contact. I understand that if employed, my employment will not be for any fixed period of time and may be terminated by the company at any time.

I understand my failure to report for work will indicate I have quit.

Applicant Signature: _____ Date: _____