

## **EMPLOYMENT APPLICATION An Equal Opportunity Employer**

## **Please Print**

Date	Last N	ame		First N	ame	]	Middle
Present Address							
No. & Street	City			State		2	Zip
Permanent Address	(if differen	from present add	ress)				
No. & Street	City			State			Zip
Business Phone					Home Phone		
<b>Employment Desir</b> Position applying for					Date Available for Er	mployment _	
Minimum Wage/Sa	lary Expect	ed:					
Have you applied w	ith The DA	C before?		□ Yes	□ No If yes, when?		
Have you ever worl	ked for The	DAC before?	Yes	□No	If yes, when?		
Are you available to	o work:				Evenings □ Yes □ No Holidays □ Yes □ No		
Personal Informat If hired, would you		ble means of trans	sportati	on to an	d from work?	□ Yes □	□ No
Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age.)					□ Yes □	□ No	
If hired, can you pro- legal right to live ar			tizensh	ip or pro	oof of your		□ No
Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?					□ Yes □	□ No	
If no, describe the f	unctions tha	t cannot be perfor	med.				

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. If you need a copy of the job description for which you are applying, please email HR at <a href="maxor.com">hr@maxor.com</a>. Hire may be subject to passing a medical examination, and to skill and agility tests.)

		misdemeanor)?  crime(s) when		☐ Yes ☐ No convicted and	disposition of the cas	se (list even if you
record has bee			and where			e (list even ii you
	f the offense, the	he surrounding ci			viction of a criminal offece of the offense to the p	
Credential Ir		#:		Sta	ate Registration:	
Expiration Da	ite:			Other (specify):		
Education, T School	Naı			No. of years Completed	Did you Graduate?	Degree or Diploma
High School	Name				□ Yes □ No	
	Address			-		
	City	State	Zip	-		
College/ University	Name				□ Yes □ No	
	Address			-		
	City	State	Zip	-		
College/ University	Name				□ Yes □ No	
	Address			-		
	City	State	Zip	-		
Vocational/ Business					□ Yes □ No	
	Name					
	Address			-		
	City	State	Zip	-		

## **Employment History**

List below all present and past employment starting with your most recent employer (last five years is sufficient). Account for all periods of unemployment. You must complete this section even if attaching a resume.

Name of Employer			Telep	hone No:		
		_ Your Supervisor's Name & Title				
Address & Street	City		State		Zip	
Dates of Employment:  Your Position and Duties	From	То	_	·	Starting	Ending
Reason for Leaving		May w	ve contact this em	ployer for a re	eference?	Yes □ No
Name of Employer	Telephone No:					
Type of Business		Your Supervisor's Name & Title				
Address & Street	City		State		Zip	
Dates of Employment:  Your Position and Duties	From	То	_	Pay Rate:	Starting	Ending
Reason for Leaving		May w	ve contact this em	ployer for a re	eference?	Yes □ No
Name of Employer			Telep	hone No:		
Type of Business		_ Your Sup	ervisor's Name &	Title		
Address & Street	City		State		Zip	
Dates of Employment:	From	То	_	Pay Rate:_	Starting	Ending
Your Position and Duties						
Reason for Leaving		May w	ve contact this em	ployer for a re	eference?	Yes □ No

## **Equal Employment Opportunity (EEO Data)**

The DAC is an equal employment opportunity employer and does not discriminate based on race, color, religion, national origin, gender, age, veteran status, disability, or any classification protected by law. The information below will be used only to comply with certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. **Submission of this information is voluntary and will not become part of the hiring process**. If you are employed by The DAC, this information will not become part of your permanent record.

Gender:	$\Box$ Female $\Box$ Male		
Race/Ethni (Please chec	city: ck one of the descriptions below correspondi	ing to the ethni	ic group with which you most identify)
	Hispanic or Latino-(This category includes all employees who answers YES to the question-are you Hispanic or		Native Hawaiian or Other Pacific Islander-(Not Hispanic or Latino)
	Latino?)		Asian-(Not Hispanic or Latino)
	White (Not Hispanic or Latino)		American Indian or Alaska Native-(Not Hispanic or Latino)
	Black or African American-(Not Hispanic or Latino)		Two or More Races-(Not Hispanic or Latino)
How did y	ou hear of our opening?		
<ul><li>☐ Current Employee</li><li>☐ Website</li></ul>			spaper Ad er – Explain
Please Read	d Carefully, Initial Each Paragraph and S	Sign Below	
Initials	my chances for employment and that the my knowledge. I further certify that I, application. I understand that any omit or on any document used to secure employment.	he answers give the undersigne ssion or missta ployment shall	any information that might adversely affective by me are true and correct to the best of applicant, have personally completed this atement of material fact on this application be grounds for rejection of this application ess of the time elapsed before discovery.
Initials	education, and other matters relat authorize the references I have liste and other information related to my disclosure. In addition, I hereby re-	ed to my sund to disclose work records lease The DA and association	nvestigate my references, work recordinate interpretation in the too to the DAC any and all letters, reports and the too the too the DAC any and all letters, reports and the too the too to the too the
Initials	which be granted or during my employment contract between The I if I am employed, my employment iterminated at any time, with or with DAC and that no promises or repres	employment DAC and measis for no definant cout prior noting centations cor	ation, or conveyed during any interview t, if hired, is intended to create an In addition, I understand and agree that nite or determinable period and may be ice, at the option of either myself or The ntrary to the foregoing are binding on d by me and The DAC's designated

Initials	I understand that all offers of employment with The DAC are contingent upon satisfactory results of a background check, including licensure/registration verification (if applicable), criminal history, references, and a pre-employment drug screen.
Initials	I understand that in the event of an offer of employment, I will be responsible for providing proof of eligibility for employment in the United States within three (3) days of employment. Failure to provide this proof will result in the termination of my employment.
acknowledge previous emp information at might have, p this information from all liabit such information	igned, have made application for employment with The DAC and by my signature understanding all the statements made as part of this application. I hereby authorize all loyers, law enforcement agencies, and other references to give to The DAC any and all nd opinions concerning my previous employment, education, or any other information you ersonal or otherwise, with regard to my employment. In consideration of your furnishing on to The DAC on my behalf, I release you AND AGREE TO HOLD YOU HARMLESS lity for damages (actual, consequential, or otherwise) which may result from furnishing ion to The DAC.

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

Applicant's Signature: