



## EMPLOYMENT APPLICATION

Applying for position of: \_\_\_\_\_

Our Company is proud to be an equal opportunity employer. All qualified applicants will receive consideration without regard to race, color, religion, gender, national origin, age, disability, veteran status or any other status protected by law. This Application for employment is good for 60 days only. Consideration for employment after 60 days may require a new application.

**Your Contact Information:** *(Please print clearly, and attach additional sheets if necessary)*

\_\_\_\_\_  
Last Name                      First Name                      Middle Name                      Maiden Name                      Date

**Permanent Address:** (Also indicate current address, if different)

\_\_\_\_\_  
Address                                              City                                              State                                              Zip

\_\_\_\_\_  
Message Phone                      Home Phone                      E-mail address

### How Did You Hear About Us?

Newspaper Ad     Employment Agency/Recruiter:     Outside Referral:     Website/Other

Do any friends or relatives work for CREM Group, Inc.?     Yes     No

If yes, complete below:

\_\_\_\_\_  
Name                                              Relationship

Have you ever applied for employment at this Company before?     Yes     No

If so, when? \_\_\_\_\_

Were you referred to us by an employee of the Company?     Yes     No

If so, who? \_\_\_\_\_

### If Hired:

a) Position Desired: \_\_\_\_\_ Date Available: \_\_\_\_\_ Salary Desired: \_\_\_\_\_

b) What days and hours are you available for work?  
\_\_\_\_\_

c) Are you at least 18 years old? (Subject to verification and work permit.)     Yes     No

d) Can you, after employment, submit verification of your legal right to work in this country?

Yes     No

e) Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation(s)?     Yes     No

If no, describe the functions that cannot be performed and what the Company might do to reasonably accommodate you. Attach additional sheet if necessary. *(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.)*

**Applicant Name** \_\_\_\_\_

**Background Information:**

Have you ever been convicted of a felony or misdemeanor? *(Convictions for misdemeanor drug-related offenses that are more than two years old need not be listed.)*  Yes  No

If yes, state nature of the charges, when and where convicted, and disposition of the case:

\_\_\_\_\_

Have you been arrested for any offense, for which you are out on bail or on your own recognizance pending trial?  Yes  No If yes, give anticipated trial date: \_\_\_\_\_

*(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)*

**Education, Training and Experience:**

Diploma, Certificate	No. of years Completed	Did you Graduate?	Degree, License or
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
High School	_____		City, State
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
College/University	_____		City, State
_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
Other	_____		City, State

Please list any academic honors, scholarships, offices held, etc. which you feel support your suitability for work at this Company. *(You do not need to list any which reflect your race, color, religion, gender, national origin, age, disabilities or any other protected characteristics.)*

\_\_\_\_\_

Do you speak, write or understand any foreign languages?  Yes  No

If yes, please list which languages(s) and your ability:

\_\_\_\_\_

Do you have any other experience, training, qualifications or skills which you feel make you especially suited for work at this Company?  Yes  No

If so, please explain:

\_\_\_\_\_

**Employment History:**

Are you currently employed?  Yes  No

If yes, may we contact your current employer?  Yes  No

List below all present and past employment starting with your most recent employer (last ten years is sufficient). Account for all periods of unemployment.

**Current/Last Employer Information**

\_\_\_\_\_  
From To Company Name Address City State ( ) Telephone No. Starting / Ending  
Salary

\_\_\_\_\_  
Your Position and Duties

\_\_\_\_\_  
Reason for Leaving

**Previous Employer Information**

\_\_\_\_\_  
From To Company Name Address City State ( ) Telephone No. Starting / Ending  
Salary

\_\_\_\_\_  
Your Position and Duties

\_\_\_\_\_  
Reason for Leaving

More on attached sheet (to list other employment, or to explain gaps in employment or periods of unemployment)

**Previous Employer Information**

\_\_\_\_\_  
From To Company Name Address City State ( ) Telephone No. Starting / Ending  
Salary

\_\_\_\_\_  
Your Position and Duties

\_\_\_\_\_  
Reason for Leaving

More on attached sheet (to list other employment, or to explain gaps in employment or periods of unemployment)

**Previous Employer Information**

\_\_\_\_\_  
From To Company Name Address City State ( ) Telephone No. Starting / Ending  
Salary

\_\_\_\_\_  
Your Position and Duties

\_\_\_\_\_  
Reason for Leaving

More on attached sheet (to list other employment, or to explain gaps in employment or periods of unemployment)

**References:**

List below three persons not related to you who have knowledge of your professional work performance.

_____	_____	(____)	_____
First Name	Last Name	Telephone No	Company and Relationship
_____	_____	(____)	_____
First Name	Last Name	Telephone No	Company and Relationship
_____	_____	(____)	_____
First Name	Last Name	Telephone No	Company and Relationship

**Applicant's Statement & Agreement**

In the event of my employment to a position in this Company, I will comply with all rules and regulations of this Company. I understand that the Company reserves the right to require me to submit to a test for the presence of drugs in my system prior to employment and at any time during my employment, to the extent permitted by law. I understand that if my position involves operating a vehicle on company business that any offer of employment may be contingent upon a satisfactory driving record. I also understand that any offer of employment may be contingent upon the passing of a physical examination. I consent to the disclosure of the results of any physical examination and related tests to the Company. I also understand that I may be required to take other tests such as personality and honesty tests, prior to and during my employment. I understand that should I decline to sign this consent or take any of the above tests, my application for employment may be rejected or my employment may be terminated. I understand that bonding may be a condition of hire. If it is, I will be so advised either before or after hiring and a bond application will have to be completed.

I further understand that the Company may obtain Public Records about me as part of a background investigation and that I may waive my right to receive a copy of such Public Records by checking the box to the right [ ].

I further understand that the Company may contact my previous employers. I authorize those employers to disclose to the Company all records and information pertinent to my employment with them. In addition to authorizing the release of any information regarding my employment, I hereby waive any rights or claims I have or may have against my former employers, their agents, employees, and representatives, as well as other individuals who release information to the Company, and release them from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to me. I authorize the persons named herein as personal references to provide the Company with any pertinent information they may have regarding myself.

I hereby state that all the information that I have provided on this application or any other documents completed in connection with my employment, and in any interview is true and accurate. I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand that if I am employed and any information provided to the Company is found to be false or incomplete in any respect, I may be dismissed. I understand if selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 Form in this regard.

If hired, I agree as follows: My employment and compensation is terminable at-will, is for no definite period, and my employment and compensation may be terminated by either the Company (employer) or me at any time and for any reason whatsoever, with or without good cause.

This is the entire agreement between the Company and me regarding the length of my employment and the reasons for termination of employment, and this agreement supersedes any and all prior agreements regarding these issues. It is further agreed and understood that any agreement contrary to the foregoing must be entered into, in writing, by the President or Owner of the Company. No supervisor or representative of the Company, other than its President or Owner, has any authority to enter into any agreement for employment for any specified period of time or make any agreement contrary to the foregoing. Oral representations made before or after you are hired do not alter this Agreement.

If any term or provision, or portion of this Agreement is declared void or unenforceable it shall be severed and the remainder of this Agreement shall be enforceable.

I understand that if I refuse to participate in or fail to pass any pre-employment drug screen, any employment offer made to me will be withdrawn.

**IF YOU HAVE ANY QUESTIONS REGARDING THIS STATEMENT, PLEASE ASK A COMPANY REPRESENTATIVE BEFORE SIGNING.**

**I HEREBY ACKNOWLEDGE THAT I HAVE READ THE ABOVE STATEMENTS AND UNDERSTAND THE SAME.**

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE STATEMENT & AGREEMENT.**

I understand that any omission or misstatement of fact on this application, my resume submitted to this Company, or on any document used to secure employment, may result in the rejection of this application or my immediate discharge if I am employed, regardless of the time elapsed before discovery.

\_\_\_\_\_  
Print Applicant Name

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date Signed