

Employment Application

Applicant Information							
Full Name:						Date:	
	Last	First			М.І.		
Address:	Street Address					Apartment/Unit #	
	City				State	ZIP Code	
Phone:			Email				
Date Availat	ble:	-			Desired	Salary: <u>\$</u>	
Position App	blied for:						
Are you a ci	tizen of the United States?	YES NO	lf no, a	ire you	authorized to wo	YES rk in the U.S.?	NO □
Have you ev	YES NO Have you ever worked for this company?						
YES NO Have you ever been convicted of a felony? □ □							
lf yes, expla	in:						
Education							
High School	:	Addre	ss:				
From:	То:	Did you gradua	YES te? □	NO	Diploma:		
College:		Addre	ss:				
From:	То:	Did you gradua	YES te? □	NO □	Degree:		
Other:		Addre	SS:				
From:	To:	Did you gradua	YES te?	NO □	Degree:		



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Refe	erences			
Please list three professional references.				
Full Name:	Relationship:			
Company:	Phone:			
Address:				
Full Name:	Relationship:			
Company:				
Address:				
Full Name:	Relationship:			
Company:				
Address:				
Militar	y Service			
Branch:	From:	To:		
Rank at Discharge:	Type of Discharge:			
If other than honorable, explain:				



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	Previous E	mploym	ent		
Company:				Phone:	
Address:				Supervisor:	
Job Title:					
Responsibil	ities:				
From:	То:	Reason	for Leaving:		
May we con	tact your previous supervisor for a reference?	YES	NO □		
					_
Company:				Phone:	
Address:				Supervisor:	
Job Title:					
Responsibil	ities:				
From:	То:	Reason	for Leaving:		
May we con	tact your previous supervisor for a reference?	YES			
Company:				Phone:	
Address:				Supervisor:	
Job Title:					
Responsibil	ities:				
From:	То:	Reason	for Leaving:		
May we con	tact your previous supervisor for a reference?	YES	NO □		



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Disclaimer and Signature

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:

At Will Employment

The relationship between you and Desco, Inc. is referred to as "employment at will." This means that your employment can be terminated at any time for any reason, with or without cause, with or without notice, by you or the Desco, Inc.. No representative of Desco, Inc. has authority to enter into any agreement contrary to the foregoing "employment at will" relationship. You understand that your employment is "at will", and that you acknowledge that no oral or written statements or representations regarding your employment can alter your at-will employment status, except for a written statement signed by you and either our Executive Vice President, Chief Operations Officer, or the Company's President.

MVR Release Consent Form

By signing below, I, _______, (print name) voluntarily give consent to Desco, Inc. to obtain a copy of my Motor Vehicle Record (MVR). This consent is given in satisfaction of Public Law 18 USC 2721 et. Seq., "Federal Drivers Privacy Protection Act", and is intended to constitute "written consent" as required by this Act.

Signed:	 	
Date:	 	
Driver's License Number:	 	
State:		