

An Equal Opportunity Employer
APPLICATION FOR EMPLOYMENT

1. Today's Date: _____ 2. Position applying for: _____

3. Name: _____

Last Name

First Name

M.I.

4. Please list other names used for work or school: _____

5. Social Security No: _____ 6. Home Telephone Number: _____

7. Other Telephone Numbers: _____

8. Address: _____

Street

City

State

Zip

9. Previous Address: _____

Street

City

State

Zip

10. When Available: _____ 11. Salary Requirements: _____

12. Applying for: Full Time Part Time Seasonal

13. What prompted you to apply with our company (list specific source if applicable)?

Ad in paper / publication _____ Ad with placement office agency _____

Referred by employee _____ Other _____

14. Is your availability for work limited to any specific times? Yes No

If yes, please detail the work, as well as the hours and days of the week involved:

15. Are you willing to work flexible hours, which could include weekends and/or overtime? Yes No

16. Do you plan to engage in other work while in our employment? Yes No

If yes, please describe the work, as well as the hours and days of week involved:

17. Are you either a citizen of the United States or an alien authorized to work in the United States?

Yes No (Employment is subject to verification of your legal right to work in the United States.)

18. Name and location of High School: _____

18a. Did you graduate? Yes No

19. Equivalency - GED Yes No

20. Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12

21. List special training (College, University, Business, Trade, Vocational, Armed Forces, etc.)

Name of School	Location	Dates Attended	Major	Certificate/Diploma
_____	_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>
_____	_____	_____	_____	Yes <input type="checkbox"/> No <input type="checkbox"/>

22. Have you ever been disciplined or discharged from employment? Yes No

22a. Have you ever been asked to resign from employment? Yes No

22b. If the answer to either of the above questions is "Yes", please write a full description of the circumstances in the space provided: _____

23. Do you have a current valid drivers license? Yes No

23a. If yes, issuing state and license number: _____

23b. Can you provide proof of auto liability insurance? Yes No

24. Can you pass a test to detect the use of illegal drugs? Yes No

25. Have you been convicted of a felony, or theft related misdemeanor? Yes No If yes, give details including type of offense, sentence, and dates: _____

A conviction will not necessarily be a bar to employment. Facts such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account.

EMPLOYMENT RECORD

26. List all jobs held in the last TEN (10) years and any other jobs relevant to the position for which you are applying. Major changes in duties or job titles with the same employer should be listed as separate jobs. Start with your PRESENT or MOST RECENT position and work back in years. BE SPECIFIC. If additional space is needed, please use a separate piece of paper. NOTE: We may contact previous employers to verify your description of past duties.

26a. May we contact your present employer regarding your record of employment? Yes No

JOB ONE (Present or Most Recent Job)

From _____ To _____ Total Time _____

Employer _____

Address _____

City _____ State _____ Zip _____

Telephone() _____

Job Title _____ Hours Per Week _____

Starting Salary \$ _____ Ending Salary \$ _____

Specific Duties: _____

_____ Number of Employees Supervised _____

Supervisor's Name & Title _____

Reason for Leaving _____

JOB TWO

From _____ To _____ Total Time _____

Employer _____

Address _____

City _____ State _____ Zip _____

Telephone() _____

Job Title _____ Hours Per Week _____

Starting Salary \$ _____ Ending Salary \$ _____

Specific Duties: _____

_____ Number of Employees Supervised _____

Supervisor's Name & Title _____

Reason for Leaving _____

JOB THREE

From _____ To _____ Total Time _____

Employer _____

Address _____

City _____ State _____ Zip _____

Telephone() _____

Job Title _____ Hours Per Week _____

Starting Salary \$ _____ Ending Salary \$ _____

Specific Duties: _____

_____ Number of Employees Supervised _____

Supervisor's Name & Title _____

Reason for Leaving _____

JOB FOUR

From _____ To _____ Total Time _____

Employer _____

Address _____

City _____ State _____ Zip _____

Telephone() _____

Job Title _____ Hours Per Week _____

Starting Salary \$ _____ Ending Salary \$ _____

Specific Duties: _____

_____ Number of Employees Supervised _____

Supervisor's Name & Title _____

Reason for Leaving _____

27. If there is additional information that you want to provide regarding your experience, education, skills, competencies or interest in working for Kohner Properties, Inc., please use the space below:

AUTHORIZATION AND CERTIFICATION BY EMPLOYMENT APPLICANT

Applicant's Printed Name _____

For purposes of this certification, the term application includes this employment application form and any supplemental questionnaire, exhibit, resume or biographical sheet submitted by Applicant.

I certify that all information given on this application is true, correct, and complete. I have accounted for all of my work experience, training, and other information requested on this application. I have not withheld any fact or circumstance which is covered by this application.

I understand that any false, misleading, or incomplete information on this application will result in rejection of my application or termination of my employment whenever discovered.

I understand that I may be asked to take job-related written tests and skill tests applicable for the position for which I am applying. If I refuse to be tested, I understand that I will not be further considered for employment.

If I am considered for employment, I authorize any inquiry to be made about any information contained in this application. I agree to furnish additional information as may be requested; and I authorize Employer and agencies or companies of Employer's choice to investigate all information on this application. I release Employer and all other parties from any claims, liabilities and damages resulting from obtaining or furnishing such information.

I understand that before or after receiving any offer of employment, I may be asked to submit to testing for the current illegal use of drugs by a firm that is chosen and paid for by Employer. I understand that the reason for such testing is that Employer endeavors to operate its business in a safe manner for all employees, customers, residents, visitors and / or guests. The results of such testing will be communicated to Employer or its agents. If I refuse to be tested or if I produce a positive test result for the current illegal use of drugs, I understand that I will not be further considered for employment.

If I am employed, I understand that I will be asked to sign a Federal I-9 form and provide positive proof of my identity and verification of my right to live and work in the U.S.A.

If employed, I agree to abide by Employer's rules, procedures, and policies as modified from time to time, including any drug-free workplace policies. I understand that the job being applied for required reliable attendance and dependable performance during the contemplated working hours. I understand that if I am employed, I may be required to work various shifts and schedules as directed by my supervisor. I understand that any employment is subject to change in wages, conditions, benefits, and operating policies. I understand that if I am employed, such employment will be for an indefinite period and can be terminated at any time by Employer or myself, without notice and without cause.

I understand that this is an application only and that it does not constitute an offer of employment or an employment contract. As the Applicant named above, I authorize Employer and/or its agents to:

1. Obtain verification of any information provided by me in this employment application in any supplemental questionnaire, exhibit, resume, or biographical sheets exhibited by Applicant.
2. Obtain information regarding my work habits, skills and conduct from my past and present employers, as well as, listed or developed references or institutions.
3. Obtain information from law enforcement and other governmental agencies, military authorities, and private companies concerning my conduct, including traffic and criminal violations.
4. Obtain information from education institutions concerning my educational records, conduct, and skills.
5. Obtain a consumer credit report in conjunction with my application for employment with Kohner Properties, Inc.

The information obtained will in no way be used in violation of any federal or state equal employment opportunity law or regulation. I further authorize all institutions, agencies, companies or persons referred to above, to give Employer and/or its agents all information requested. I release Employer, its agents and all other parties from any claims, liabilities, and damages resulting from obtaining or furnishing information. A copy of this authorization and release shall be as valid as the original.

Applicant's Signature _____ Date _____

Drivers License Number & State: _____ Social Security No. _____

(State Issued Driver's License or Alternative Identification)