



## APPLICATION FOR EMPLOYMENT

**ALL POTENTIAL EMPLOYEES ARE EVALUATED WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A NON-JOB RELATED HANDICAP OR ANY OTHER LEGALLY PROTECTED STATUS.**

Position Sought: \_\_\_\_\_

How did you learn about the position? \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Email Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ D.O.B \_\_\_\_\_

On what date would you be available for work? \_\_\_\_\_ Desired Wage/Salary \$ \_\_\_\_\_

Are you a U.S. citizen, or are you otherwise authorized to work in the U.S. without any restriction? [ ] Yes [ ] No

Have you ever been convicted of a felony or any theft offence? [ ] Yes [ ] No

If yes, please describe circumstances: \_\_\_\_\_

Have you ever been involuntarily terminated or asked to resign from any position of employment? [ ] Yes [ ] No

If yes, please describe circumstances: \_\_\_\_\_

If selected for employment, are you willing to submit to a pre-employment drug screening test? [ ] Yes [ ] No

If selected for employment, are you willing to submit to a criminal background check? [ ] Yes [ ] No

Have you ever been bonded or refused bond? [ ] Yes [ ] No

Have you ever been involved in any lawsuit, either as a witness or as a party? [ ] Yes [ ] No

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

| EDUCATION   |          |                |                 |       |
|-------------|----------|----------------|-----------------|-------|
| School Name | Location | Years Attended | Degree Received | Major |
|             |          |                |                 |       |
|             |          |                |                 |       |
|             |          |                |                 |       |

Other training, certifications, or licenses held: \_\_\_\_\_

List other information pertinent to the employment you are seeking: \_\_\_\_\_

\_\_\_\_\_



**EMPLOYMENT**

*(Most Recent First; Use additional pages, if necessary).*

1. Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Dates Employed \_\_\_\_\_ Prior Position Held within Company (if any): \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone \_\_\_\_\_ Supervisor \_\_\_\_\_ Job Title \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

2. Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Dates Employed \_\_\_\_\_ Prior Position Held within Company (if any): \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Ph \_\_\_\_\_ Supervisor \_\_\_\_\_ Job Title \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

3. Employer \_\_\_\_\_ Job Title \_\_\_\_\_  
Dates Employed \_\_\_\_\_ Prior Position Held within Company (if any): \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Pho \_\_\_\_\_ Supervisor \_\_\_\_\_ Job Title \_\_\_\_\_  
Starting Salary \_\_\_\_\_ Ending Salary \_\_\_\_\_  
Duties Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

**ACKNOWLEDGMENT AND AUTHORIZATION**

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision; and I authorize my prior employers and education institutions to release such information to Intellinetics, Inc.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an “at will” nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this “at will” employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date