

Application for Employment
General Information



Name: Last		First	Middle Initial	Telephone Numbers	
Present Address: Street		City	State	Zip	Home:
Code					Work:
Alternative Address: Street		City	State	Zip	May we contact you there?
Code					
Do you currently have any relatives employed with our company and have you ever had any relatives working here in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when? What Position?					
Title of Position Desired		Type of Work Desired <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary		Salary Expectation	
Date Available to Begin Employment		List Hours and Days Available for Work			
Have you received and reviewed a current copy of the job description and requirements for this position? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you able, either with or without reasonable accommodation, to perform the essential functions of the position for which you are applying? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been denied credit? If yes, explain?		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you over the age of 16? <input type="checkbox"/> Yes <input type="checkbox"/> No		Federal law requires that individuals entering an employment relationship, before they begin employment, provide documentation of eligibility for employment within the United States. If offered employment will you be able to provide proof of your eligibility for employment? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you been convicted of a criminal offense within the past 7 years? If so, please describe the nature of the conviction, including the date and location of the conviction. <small>Such a conviction will not necessarily disqualify you for the position for which you are applying. The seriousness and type of offense will be considered in relationship to the nature of the position.</small>					
Have you ever been discharged from employment as a result of theft? If yes, explain?		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever been bonded?		Been refused?		Been canceled?	

Educational and Training

School or Training	Name & Address	Course of Study	Grade Average	Circle Highest Year Completed	Diploma, Certificate or Degree
High School				1 2 3 4 GED	
Business or Vocational School				1 2 3 4 5	
College or University				1 2 3 4 5	
Graduate School				1 2 3 4 5	
Other					
Military Service or Training	Military Branch	Length of Service	Highest Rank	Describe any pertinent training or schooling received	



Employment History

Starting with your current or most recent position, please complete the section below. You are only required to provide starting and ending dates of employment for those positions held within the last five (5) years. Exclude any information that might indicate gender, age, race, color, creed, national origin, religion, sexual orientation, marital status, pregnancy, physical or developmental disability, membership or activity in a local commission, Vietnam era veteran status, disabled veteran status, other eligible veteran status, public assistance status or any other legally protected basis. Use an additional sheet if necessary.

Current or Most Recent Employer			Type of Business			Telephone Number		
Address		Street		City		State		Zip Code
Starting Month Year		Ending Month Year		Beginning Salary		Current or Ending Salary		
Date		Date						
Position Title and Brief Description of Responsibilities								
Reason for Leaving				Manager's Name			May we contact this employer? If not, please explain.	

Next Most Recent Employer			Type of Business			Telephone Number		
Address		Street		City		State		Zip Code
Starting Month Year		Ending Month Year		Beginning Salary		Current or Ending Salary		
Date		Date						
Position Title and Brief Description of Responsibilities								
Reason for Leaving				Manager's Name			May we contact this employer? If not, please explain.	

Next Most Recent Employer			Type of Business			Telephone Number		
Address		Street		City		State		Zip Code
Starting Month Year		Ending Month Year		Beginning Salary		Current or Ending Salary		
Date		Date						
Position Title and Brief Description of Responsibilities								
Reason for Leaving				Manager's Name			May we contact this employer? If not, please explain.	

Describe all time periods of one month or more not covered in the employment section above. You are only required to provide starting and ending dates for those activities taking place within the last five (5) years. Exclude any information that might indicate gender, age, race, creed, national origin, religion, sexual orientation, marital status, pregnancy, physical or developmental disability, membership or activity in a local commission, disabled veteran status, Vietnam era veteran status, other eligible veteran status, public assistance status or any other legally protected basis.

Time Period				Description of Activities
From		To		
Mo	Yr	Mo	Yr	
Mo	Yr	Mo	Yr	
Mo	Yr	Mo	Yr	
Mo	Yr	Mo	Yr	



References Please list below at least three (3) individuals who are not relatives or employed by this company, who have observed and will be able to comment on specific competencies, skills, and knowledge you have developed that may be applicable to the position for which you are applying (for example, work-related references).

Name	Company and Position	Address	Telephone

Skills

Please summarize any special job-related skills, knowledge or abilities acquired from employment or other experiences that qualify you to meet the job requirements of the position for which you have applied and that may assist us in considering you for this position. Exclude any information that might indicate gender, age, race, creed, national origin, religion, sexual orientation, marital status, pregnancy, physical or developmental disability, membership or activity in a local commission, disabled veteran status, Vietnam era veteran status, other eligible veteran status, public assistance status or any other legally protected basis.

Complete this section if the position for which you are applying requires office/clerical skills, machine operation or computer competency.

Select those that apply and indicate your competency in any skills you have acquired through education, training or experience.

- Typing or Keyboarding Speed _____
- 10 – Key Operation
- Proof Machine Operation
- Computer Skills List or describe specific skills or knowledge of specific hardware or software applications.

- Other (Please describe)

Please Read Before Signing

I certify that the information provided on this application is true and complete. I understand that any omission or false information may disqualify me from further consideration and/or result in my termination if I am hired. By signing below, I am affirming that the statements I made in this application, plus any additional written and oral information provided to InterceptEFT (such as a resume or interview) are true, and that I have not omitted anything about myself that might be important to InterceptEFT in deciding whether to hire me. I understand that any false statements or material omission is sufficient grounds for InterceptEFT to reject this application without further consideration and could result in termination of employment if the false statement or material omission is discovered after employment has occurred.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between InterceptEFT and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon InterceptEFT unless made in writing and signed by an authorized representative of InterceptEFT. I understand and agree that employment with InterceptEFT, its affiliates and subsidiaries is of an “at will” nature and if an employment relationship is established, I understand that I have the right to terminate my employment at any time, for any reason or no reason, and InterceptEFT has the right to terminate my employment for any non-discriminatory reason.

Signature _____ Date _____

I authorize InterceptEFT to fully investigate my background by, including but not limited to, contacting and obtaining information regarding my past employment, education and training or by conducting a criminal background check to evaluate my application for employment. I further release and hold harmless InterceptEFT, its officers, employees and agents, and personnel providing any information about me from any and all claims arising from investigating or providing information regarding my background.

Signature _____ Date _____

