



## EMPLOYMENT APPLICATION

NAME LAST	FIRST	MIDDLE	TELEPHONE	TODAY'S DATE
PRESENT ADDRESS ZIP	CITY	STATE	ALTERNATE TELEPHONE	DATE AVAILABLE
POSITION APPLIED FOR			REFERRED BY	PAY EXPECTED

Are you over 18?  Yes  No

### EDUCATION

SCHOOLS ATTENDED	SCHOOL NAME	ADDRESS	LAST GRADE COMPLETED	FIELD OF STUDY	DEGREE EARNED
				MAJOR/MINOR	
HIGH SCHOOL					
VOCATIONAL SCHOOL					
COLLEGE					
ADDITIONAL TRAINING					

### EMPLOYMENT HISTORY List all employment of one month or more during the last ten years, beginning with current or most recent.

NAME OF FIRM	ADDRESS/TELEPHONE	FROM - TO MO/YR	POSITION HELD & SUPERVISOR	FINAL PAY	REASON FOR LEAVING

**HISTORY OF RESIDENCE** List all places you have resided during the last seven years, beginning with current / most recent.

STREET ADDRESS INCLUDE APT. #	CITY	COUNTY	STATE	ZIP	TO AND FROM DATES

May we contact your current employer regarding your qualifications?  Yes  No

It is the policy of the company to hire only United States citizens and aliens lawfully authorized to work in the United States.

Are you authorized to work in the U.S. for any employer?  Yes  No

Have you ever used another name?  Yes  No

List all other names by which you have been known: \_\_\_\_\_

Under your current name or another name, have you ever been convicted of, plead guilty or nolo contendere to, received deferred adjudication for, or been on any form of diversion for any criminal offense?  Yes  No

Have you ever, under your name or any other name, been convicted of a crime, which resulted with your being imprisoned and released from prison or paroled?  Yes  No

If yes, explain each conviction fully, when, where and of what you were convicted and disposition of the case(s):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<p>HAVE YOU EVER WORKED FOR THIS COMPANY BEFORE? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>WHERE? _____</p> <p>DATES: _____</p> <p>POSITION: _____</p>
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Are you able to perform the essential functions of the job for which you are applying with or without reasonable accommodation?  Yes  No

If no, describe the functions that cannot be performed:

\_\_\_\_\_

\_\_\_\_\_

**PROFESSIONAL REFERENCES (SUPERVISORS) No friends or relatives please!**

NAME	ADDRESS/TELEPHONE	YEARS & NATURE OF ACQUAINTANCE

**OFFICE USE ONLY- REMARKS**

Interviewed \_\_\_\_\_ Not Interviewed \_\_\_\_\_


**PLEASE READ CAREFULLY BEFORE SIGNING**

Thank you for your interest in employment with the Company. We are an Equal Opportunity/Affirmative Action employer, and select the best matched individual for each position based upon job-related qualifications, regardless of race, religion, national origin, age, sex, veteran status, disability or other protected status under state, federal or local Equal Employment Opportunity Laws.

*I certify that any information given during the course of application is true and complete to the best of my knowledge. I authorize a thorough investigation of my entire former employment history and other references and to verify all data given in my application for employment, related papers or oral interviews. I understand that any material misrepresentation or deliberate omission of a fact in my application may be justification for termination if hired. I release the company and all affiliated entities and all informants of all liability whatsoever resulting from such investigations.*

*Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employability, authorization and identity (valid driver's license, green card, etc.) within three days of being hired. Failure to submit such proof within the required time could result in immediate employment termination.*

*I understand that any offer of employment is contingent upon the passing of a drug and alcohol screen, criminal background check, sex offender registry check and, if applicable, a physical and the verification of my motor vehicle driving record.*

*I also understand that any falsification, deliberate omission or misrepresentation of facts upon this application will be considered just cause for dismissal at the discretion of the company should I become an employee.*

*In consideration of my employment, I agree to conform to the rules and regulations of the company and my employment and compensation are "at-will" in that I agree that I can be terminated with or without cause, and with or without notice, at any time, at the option of either the company or myself. I also understand that the company does not intend to create an implied contract between the company and its employees through the development and dissemination of company policies, procedures, handbooks or other literature.*

*I have read and understand the above.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Invitation to Self-Identify

Mavagi Enterprises, Inc. is a federal contractor and Equal Opportunity/Affirmative Action Employer, and as such must uphold specific hiring practices and record keeping.

All information will be treated as confidential. This form is to be completed on a voluntary basis.

Please complete the following:

**Gender:** Female \_\_\_\_ Male \_\_\_\_

**Disability:** **Disabled** \_\_\_\_ **Non-Disabled** \_\_\_\_

**Race:** White (Non-Hispanic) \_\_\_\_ Black (Non – Hispanic) \_\_\_\_

Hispanic \_\_\_\_ American Indian/Alaskan Native \_\_\_\_

Asian / Pacific Islander \_\_\_\_ Other \_\_\_\_

### **Military Services:**

\_\_\_\_ **Armed Services Medal Veteran** - any veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985 (61 FR 1209) (an operation in which the participants encountered no foreign armed opposition or imminent hostile action.)

\_\_\_\_ **Disabled Veteran** - Includes all veterans with service-connected disabilities.

\_\_\_\_ **Other Protected Veteran** - Any other veteran who served on active duty in the U.S. military ground, naval, or air service during a war or in a campaign or expedition, for which a campaign badge has been authorized, other than a special disabled veteran, veteran of the Vietnam era, or recently separated veteran.

\_\_\_\_ **Recently Separated Veteran** - Defined as any veteran who served on active duty in the U.S. military, ground, naval, or air service during the one-year period (under VEVRAA regulations) or three-year period (under JVA regulations), beginning on the date of such veteran's discharge or release from active duty.

\_\_\_\_ **Special Disabled Veteran** - A veteran who served on active duty in the U.S. military ground, naval, or air service and (1) who was discharged or released from active duty because of a service-connected disability, or (2) who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) for certain disabilities under laws administered by the Department of Veterans Affairs (i.e., disabilities rated at 30 percent or more, or at 10 or 20 percent if the veteran has been determined to have a serious employment handicap.)

\_\_\_\_ **Veteran of the Vietnam Era** - Under Section 4212, a veteran of the U.S. military, ground, naval, or air service, any part of whose service was during the period of August 5, 1964, and May 7, 1975, who (1) served on active duty for a period of more than 180 days, and was discharged or released with other than a dishonorable discharge, or (2) was discharged or released from active duty because of a service-connected disability. "Vietnam Era Veteran" also includes any veteran of the U.S. military, ground, naval, or air service who served in the Republic of Vietnam between February 28, 1961, and May 7, 1975.

Employee Name \_\_\_\_\_

Date \_\_\_\_\_