APPLICATION FOR EMPLOYMENT





Your "Access II" disABILITY Resources

ACCESS II is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability, or veteran status.

PERSONAL:				
Name			Email address:	
Last	First			
If you have ever used	another nam	e(s) please provide:_		
Address				
Number & S	Street	City State	Zip Code	
Phone(Home)	Phone	e (work)	Position Sought	Full Time Part Time_
High School:				r the position you are seeking.
		l: School	Graduated	1? □ Yes □ No Certificate Earned

EMPLOYMENT: List last employer first, including U.S. Military Service.

Employer 1	P	osition Title
Address, City, State, Zip		
Reporting To:		_ Telephone
Dates of Employment: From	То	Verifiable annual base salary
Reason for Leaving		
May we contact this employer?		
Employer 2	P	osition Title
Address, City, State, Zip		
Reporting To:		_ Telephone
		Verifiable annual base salary
Reason for Leaving		
May we contact this employer?	🗌 Yes 🗌 No	
Employer 3	P	osition Title
Address, City, State, Zip		
		Telephone
Dates of Employment: From	То	Verifiable annual base salary
Reason for Leaving		

Other activities and any special awards (e.g. professional/academic organizations, community activities):

Explain any gaps in work history: _____

OTHER INFORMATION:

Are you legally authorized to work in the United States? U Yes No
Will you now or in the future require sponsorship for employment visa status (e.g. H1-B visa status)? \Box Yes \Box No
Have you ever been convicted of a felony? 🗌 Yes 🗌 No

REFERENCES:

Name:	Title:	_Phone:
Company:	Address:	
Name:		_Phone:
Company:	Address:	
Name:		_Phone:
Company:	Address:	

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize ACCESS II, ILC to verify their accuracy and to obtain reference information on my work performance. I hereby release ACCESS II, ILC from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information. I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that employment with ACCESS II, ILC is contingent upon several factors, including a satisfactory background and reference check and satisfactory completion of a post-offer drug screen. I hereby authorize all previous and current educational institutions to release to ACCESS II, ILC all relevant information relating to me to verify educational history.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

Signature of Applicant _____ Date: _____