

APPLICATION FOR EMPLOYMENT

All applicants are considered for all positions without regard to race, religion, color, sex, gender, sexual orientation, gender identity and expression, pregnancy, age, national origin, ancestry, physical/mental disability, medical condition, military/veteran status, genetic information, marital status, ethnicity, citizenship or immigration status or any other protected classification, following applicable federal, state, and local laws. By completing this application, you are seeking to join a team of hardworking professionals dedicated to consistently delivering outstanding service to our customers and contributing to the financial success of the organization, its customers, and its employees. Equal employment opportunity includes, but is not limited to, hiring, training, promotion, demotion, transfer, leaves of absence, and termination. Equal access to programs, services, and employment is available to all qualified persons. Those applicants requiring accommodation to complete the application and/or interview process should contact a management representative. **Please print.**

| | | | |
|------------------------------------|------------------------|---------------------|-------|
| Position(s) Applied for | | Date of Application | |
| | | | |
| Print Name (Last, First, & Middle) | | | |
| | | | |
| Street Address | | City | State |
| | | | |
| Main Phone Number | Alternate Phone Number | Email | |
| | | | |

EMPLOYMENT EXPERIENCE

Please list the names of your present or previous employers in chronological order with the present or most recent employer listed first. Be sure to account for all periods. If self-employed, give the company name and supply business references. Add page if necessary.

| | | |
|----------------------|-----------------------------|--|
| Name of Employer | Supervisor | May we contact? |
| | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Street Address | | |
| | | |
| Phone Number | Dates Employed (Month/Year) | |
| | From | To |
| | | |
| Job Title and Duties | Reason for Leaving | |
| | | |

| | | |
|------------------|-----------------------------|--|
| Name of Employer | Supervisor | May we contact? |
| | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Street Address | | |
| | | |
| Phone Number | Dates Employed (Month/Year) | |
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| | | |
|----------------------|--------------------|----|
| | From | To |
| Job Title and Duties | Reason for Leaving | |
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|----------------------|-----------------------------|--|
| Name of Employer | Supervisor | May we contact? |
| | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Street Address | | |
| | | |
| Phone Number | Dates Employed (Month/Year) | |
| | From | To |
| Job Title and Duties | Reason for Leaving | |
| | | |

Have you ever been involuntarily terminated or asked to resign from any job?.....☐ Yes ☐ No
If yes, please explain

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Please list any other experience, job-related skills, additional languages, or other qualifications that you believe should be considered in evaluating your qualifications for employment.

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EDUCATION

Please describe your educational background in the table provided below.

| | School Name | Years Completed | Diploma/ Degree (Yes/No) | Area of Study/Major | Specialized Training, Skills, or Extra- Curricular Activities |
|------------------------|-------------|-----------------|--------------------------------|---------------------|---|
| High School | | | | | |
| College/ University | | | | | |
| Graduate/ School | | | | | |
| Trade School | | | | | |

BUSINESS AND PROFESSIONAL REFERENCES

Please list three professional references of individuals who are **not** related to you.

| Name and Title | Relationship | Phone Number or Email |
|----------------|--------------|-----------------------|
|----------------|--------------|-----------------------|

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GENERAL INFORMATION

1. Have you ever used another name?.....☐ Yes ☐ No
2. Is any additional information relative to name changes, use of an assumed name, or nickname necessary to enable a check on your work and educational record?.....☐ Yes ☐ No

If yes to either of the above, please explain:

3. Have you ever worked for this Company before?.....☐ Yes ☐ No
 - a. If yes, please give dates and position: _____
4. Do you have friends and/or relatives working for this Company?.....☐ Yes ☐ No
 - a. If yes, name(s) and relationship(s): _____
5. On what date are you available to begin work? _____
6. Days/Hours available to work:

| Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|--------|---------|-----------|----------|--------|----------|--------|
| | | | | | | |

7. Are you available to work? ☐ Full-time ☐ Part-time ☐ Shift Work ☐ Temporary
8. If hired, would you have a reliable means of transportation to and from work?.....☐ Yes ☐ No
9. Can you travel if the position requires it?.....☐ Yes ☐ No
10. Can you relocate if the position requires it?.....☐ Yes ☐ No
11. Are you at least 18 years old?☐ Yes ☐ No
 - a. Note: If under 18, hire is subject to verification that you are of minimum legal age.
12. If hired, can you present evidence of your identity and legal right to work in this country?.....☐ Yes ☐ No
13. Are you able to perform the essential job functions of the job for which you are applying with or without reasonable accommodation?.....☐ Yes ☐ No
 - a. Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for qualified applicants/employees to perform essential job functions.
14. What machines or equipment can you operate that are related to the job for which you are applying?

Do you have a valid driver's license? Yes ☐ No ☐ Driver's License Number _____

Class of License _____ State Licensed In _____ Endorsements _____ Exp Date _____

Have you had your driver's license suspended or revoked in the last 3 years? Yes ☐ No ☐

If yes, give details: _____

A condition of employment for driving positions is to be able to pass driving record searches, be insurable by our insurance company. Are you able to comply? Yes ☐ No ☐

APPLICANT STATEMENT AND AGREEMENT

Please read and initial each paragraph below. If there is anything that you do not understand, please ask.

_____ I hereby authorize SCTelcom, Inc. to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment and, further, authorize the prior employers and references I have listed to disclose to SCTelcom, Inc. any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release SCTelcom, Inc., my former employers and all other persons, corporations, partnerships, and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ NOTICE: the consumer reporting agency that provides this report will not be a party to any decision to take adverse action and will be unable to provide the specific reason(s) why the adverse action was taken. This notice is provided under the provisions of the Fair Credit Reporting Act [15 U.S.C S 168]. A complete explanation of your rights under the Act may be obtained by referring to the Federal Statute. You may have additional rights under the applicable State Law.

_____ In the event of my employment with SCTelcom, Inc., I understand that I am required to comply with all rules and regulations of SCTelcom, Inc.

_____ If hired, I understand and agree that my employment with SCTelcom, Inc. is at-will and that neither I, nor SCTelcom, Inc. is required to continue the employment relationship for any specific term. I further understand that SCTelcom, Inc. or I may terminate the employment relationship at any time, with or without cause, and with or without notice. I understand that the at-will status of my employment cannot be amended, modified, or altered in any way by any oral modifications.

_____ I understand that the safety of employees is critical to SCTelcom, Inc. and that SCTelcom, Inc. is committed to ensuring a safe working environment. I understand that I, and every employee, have a responsibility to prevent accidents and injuries by observing all safety procedures and guidelines and following the directions of my site supervisor. I understand and agree to comply with federal, state, and local regulations related to on-the-job safety and health.

_____ I hereby certify that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate termination if I am employed, regardless of the time elapsed before discovery.

_____ I understand that if I am selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration law requires me to complete an I-9 Form in this regard.

_____ I understand that if any term, provision, or portion of this Agreement is declared void or unenforceable, it shall be severed, and the remainder of this Agreement shall be enforceable.

MY SIGNATURE BELOW ATTESTS TO THE FACT THAT I HAVE READ, UNDERSTAND, AND AGREE TO ALL OF THE ABOVE TERMS AND I AM UNTRUE ON ANY STATEMENT THAT MAY RESULT IN IMMEDIATE TERMINATION OF EMPLOYMENT. I UNDERSTAND THAT MY EMPLOYMENT IS "AT-WILL."

Signature: _____

Name (print): _____ Date: _____