

baesman: Application for Employment

PLEASE PRINT CLEARLY

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, religion or disability.

We appreciate your interest in our organization and assure you that we are interested in your qualifications. A clear understanding of your background and work history will aid us in placing you in a position that best meets your qualifications. If you have a resume (text, Word, PDF), you may send it to hr@baesman.com.

PERSONAL	Date _____
	Name _____ Social Security No. _____ <small>Last First Middle</small>
	Present Address _____ Home Phone No. _____ <small>Street City State Zip</small>
	E-mail _____ Cell Phone No. _____
	Position(s) applied for _____ Rate of pay expected \$ _____
	How did you learn about this job opening? _____
	Check One: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time Specify shift you would be available to work (check all that apply): <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd
	Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you legally eligible to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Have you ever worked for Baesman before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list position and dates: _____
	Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain: _____
Have you ever been terminated from a previous position? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, explain: _____	
List any friends or relatives working for us _____	
If your application is considered favorably, on what date will you be available to work? _____	

EDUCATION	SCHOOL	NAME AND LOCATION OF SCHOOL	COURSE OF STUDY	YEARS COMPLETED	DID YOU GRADUATE?	DEGREE OR DIPLOMA
	High School					
	College					
	Other					

MILITARY	COMPLETE THIS SECTION IF YOU SERVED IN THE U.S. ARMED FORCES		Branch of Service
	Describe your duties and any special training		Period of Active Duty (Month & Year) From: _____ To: _____
			Rank at Discharge
			Date of Final Discharge

REFERENCES	PROFESSIONAL REFERENCES (Former employers please, not friends or relatives)				
	NAME	RELATIONSHIP	YRS KNOWN	PHONE NO.	E-MAIL

May we inquire about you with your present employer? Yes No

PREVIOUS EMPLOYMENT		Please give accurate, complete full-time and part-time employment record. Start with present or most recent employer.	
PREVIOUS EMPLOYMENT	Company Name	Telephone ()	
	Address	Employed (month and year) From: To:	
	Name of Supervisor	Pay Rate Start: Last:	
	Job Title and Description of Work	Reason For Leaving	
	Company Name	Telephone ()	
	Address	Employed (month and year) From: To:	
	Name of Supervisor	Pay Rate Start: Last:	
	Job Title and Description of Work	Reason For Leaving	
	Company Name	Telephone ()	
	Address	Employed (month and year) From: To:	
Name of Supervisor	Pay Rate Start: Last:		
Job Title and Description of Work	Reason For Leaving		

EQUIPMENT		Please List Printing Equipment and/or Software You Have Used	
EQUIPMENT	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

I hereby declare that the information provided by me in the Application for Employment and any accompanying resumes, transcripts or letters of reference is true, correct and complete to the best of my knowledge. If anything contained on this application or associate information is found to be misleading, untrue, omitted or misstated, I understand that I may be refused employment or that I may be subject to discharge if discovered at a later date. I authorize Baesman to conduct a complete background check (including a criminal record check) and to verify any of the information I have provided by contacting former employers, education, training institutions, and any references and other appropriate sources. I release reference sources from all liability or damages on account of furnishing information regarding my personal character, habits, performance or disciplinary records. I further understand that if I am hired at Baesman, my employment will be at will and that my employment may be terminated with or without cause, and without notice at any time, at the option of Baesman. I understand that no representative of Baesman, other than a member of the Board of Directors of Baesman has any authority to enter into any agreement with me contrary to the foregoing, and that a member of the Board of Directors may make such an agreement only in writing. I agree any claim or lawsuit relating to my service with Baesman must be filed no more than 6 (six) months after the date of the action that is the subject of the claim or lawsuit. I waive any statute of limitations to the contrary. I understand that I will be required to pass a drug test prior to hire and I may be required to take additional drug tests as part of my employment with Baesman, and agree to the same. Furthermore, I understand that my failure to pass or refusal to submit to a drug screening examination can result in my immediate termination.

I have read and understand the contents of this employment application and, by my signature, consent to these statements.

Signature

Date