

JOB APPLICATION

Complete all requested information by typing into the fillable fields or printing and writing in ink. Add extra pages if necessary.

General Information				
Today's Date	Date Available for Work			
Name: Last First Middle	Social Security Number			
Street Address	Telephone (Home):			
City State Zip	Telephone (Cell):			
Position Desired	Salary Desired			
Full Time 40 Hrs per Wk Part Time Less than 40 Hrs	Are you authorized to work in the United States Yes No			
Federal law requires that employers hire only individuals who are authorized to be lawfully employed in the United States. In compliance with these laws, Hope Industrial Systems will verify the status of every individual offered employment with HIS. In this connection, all offers of employment are subject to verification of the applicant's identity and employment authorization, and it will be necessary for you to submit such documents as are required by law to verify your identification and employment authorization.				
Are you under 18 years of age? Yes No	If yes, can you furnish a work permit? Yes No			
Are you capable of performing the essential functions of the job for which you are applyin accommodation?	g , with or without a reasonable Yes No			
Have you ever been convicted of a felony? (Note: do not answer yes or provide any information regarding the following: (A) Arrests that did not lead to a conviction, (B) convictions that have been sealed, expunged, dismissed, or otherwise eradicated)				
Equal Opportunity Employer Statement Hope Industrial Systems [HIS] is an equal opportunity employer and does not discriminate against any applicant or employee because of race, color, religion, sex, national origin, disability, age, or military or veteran status in accordance with federal law. In addition, HIS complies with applicable state and local laws governing non discrimination in employment in every jurisdiction in which it maintains facilities. HIS also provides reasonable accommodation to qualified individuals with disabilities in accordance with applicable laws.				
Work Experience (Start with Current Employer and Co	ontinue with Former Employers)			
Employer #1	Street Address			
Phone	City State Zip			
Supervisor Title	Position			
Final Salary	Reason for Leaving			
First Day of Employment	Last Day of Employment			
May we contact your current employer?				
Employer #2	Street Address			
Phone	City State Zip			
Supervisor Title	Position			
Final Salary	Reason for Leaving			
First Day of Employment	Last Day of Employment			

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Employer #3		Street Address	Street Address		
Phone		City	City State Zip		
Supervisor Title	e	Position			
Final Salary		Reason for Leav	ving		
First Day of Employment		Last Day of Em	Last Day of Employment		
Referral Source					
How did you find out about this position?			Name (If applicable)		
Emergency Contact					
In Case of An Emergency, Contact (Name)	In Case of An Emergency, Contact (Name)		Phone Number:		
Professional References – List F	Persons Familiar with	n your Work A	Ability (Exclude Relatives)		
Reference Name #1		Phone Number	•		
How Acquainted			How Long		
Reference Name #2		Phone Number	Phone Number		
How Acquainted	How Long				
Reference Name #3		Phone Number	Phone Number		
How Acquainted			How Long		
Education and Training					
High School Name		City	State		
Years Completed	Degree Acquired		Type of Course/Major		
College Name		City	State		
Years Completed	Degree Acquired		Type of Course/Major		
Additional Training		City	State		
Years Completed	Degree Acquired		Type of Course/Major		
Computer Software					
Additional Inquiries					
Have you ever been dismissed or asked to resign from any employer? If yes, please explain.					
If employment is offered, can you provide verification of your legal right to work in the U.S.?					
Provide information about community activities, professional trade or service organizations to which you belong with you believe may demonstrate your job related abilities (you may exclude those which indicate race, color, religion, sex, national origin, age, or handicap.)					

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PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION

I have submitted the attached form to Hope Industrial Systems ("HIS") for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate HIS to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume or other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from HIS.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with HIS in the position I am seeking.

I understand that this application is not an employment contract for any specific length of time between HIS and me, and that in the event I am hired, my employment will be "at will" and either HIS or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy and the like, distributed by HIS to its employees is intended to or can create an employment contract, an offer of employment or any obligation on HIS's part. HIS may, at its sole discretion, hold in abeyance, or revoke, amend, modify, abridge, or change any benefit, policy, practice, condition, or process affecting its employees.

References: I hereby authorize HIS and its agents to make such investigations and inquiries into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquiries connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities listed by me in this form. Furthermore, I authorize HIS and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications.

Signature (use e-signature or print and sign)	Date

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CONSUMER REPORT DISCLOSURE AND GENERAL AUTHORIZATION

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

Hope Industrial Systems ("HIS") may obtain information about you from a third party consumer reporting agency for employment purposes. Thus, you may be the subject of a "consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records ("driving records"), education or employment history, or other background checks.

The investigations will be conducted by *Sterling Infosystems Inc. 6150 Oak Tree Boulevard, Suite 490, Independence, OH 44131. 1.866.338.6739 www.sterlingcheck.com*.

DISCLOSURE REGARDING "INVESTIGATIVE CONSUMER REPORTS" BACKGROUND INVESTIGATION

Hope Industrial Systems ("HIS") may request an investigative consumer report about you from a third party consumer reporting agency, in connection with your employment or application for employment (including volunteer assignment(s), as applicable) and throughout your employment if you are hired or retained, as allowed by law. An "investigative consumer report" is a background report that includes information from personal interviews (except in California, where that term includes background reports with or without information obtained from personal interviews). The most common form of an investigative consumer report in connection with your employment is a reference check through personal interviews with sources such as your former employers and associates, and other information sources. The investigative consumer report may contain information concerning your character, general reputation, personal characteristics, or mode of living.

You have the right, upon written request made within a reasonable time, to request from HIS (1) whether an investigative consumer report has been obtained about you, (2) disclosure of the nature and scope of any investigative consumer report and (3) a copy of your report. These reports will be prepared by *Sterling Infosystems Inc. 6150 Oak Tree Boulevard, Suite 490, Independence, OH 44131. 1.866.338.6739 www.sterlingcheck.com.*

ACKNOWLEDGEMENT AND AUTHORIZATION FOR BACKGROUND INVESTIGATION

I acknowledge receipt of the separate documents entitled DISCLOSURE REGARDING BACKGROUND INVESTIGATION, DISCLOSURE FOR INVESTIGATIVE CONSUMER REPORT (if applicable), A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and OTHER STATE LAW NOTICES and certify that I have read and understand those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by Hope Industrial Systems ("HIS") at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by *Sterling Infosystems Inc. 6150 Oak Tree Boulevard, Suite 490, Independence, OH 44131. 1.866.338.6739 www.sterlingcheck.com* and/or HIS. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

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CONSUMER REPORT DISCLOSURE AND GENERAL AUTHORIZATION

Signature (use e-signature or print and sign)	Date
Applicant's Printed Name	
Applicant's Date of Birth	
Applicant's Driver's License Number	
Applicant's Driver's License State of Issuance	

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