



INNSBROOK

APPLICATION FOR EMPLOYMENT

Innsbrook Corporation is an equal opportunity employer and does not discriminate on the basis of race, religion, color, national origin, age, sex, gender, genetic information, disability or any other characteristic protected by law.

Last Name	First Name	M.I.	Date of Application
Address			City/State/Zip
Phone Number	E-mail	Social Security Number	
How were you referred? <input type="checkbox"/> Employee Referral (_____)	<input type="checkbox"/> Internet/Website (_____)	<input type="checkbox"/> Walk-in <input type="checkbox"/> Other (_____)	

APPLICANT QUESTIONS:

Position applied for: _____ Salary desired: _____ Date Available: _____

If hired, can you provide documents required to establish your eligibility to work in the U.S.? Yes No

Are you 18 years of age or older? Yes No

Have you ever been convicted of, or pled guilty or no contest to, a crime other than a minor traffic violation? Yes No

If yes, please explain in detail on a separate piece of paper and include the date of final disposition of the case and the nature of the offense. This information will not necessarily disqualify you from employment but false or misleading information will. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account.

EDUCATION:

High School or last grade completed:

Name & Address of School: _____

Course of Study: _____ Number of years completed: _____ Degree/Diploma _____

College or Technical School

Name & Address of School: _____

Course of Study: _____ Number of years completed: _____ Degree/Diploma _____

Graduate or Other Schooling/Training

Name & Address of School: _____

Course of Study: _____ Number of years completed: _____ Degree/Diploma _____

MILITARY EXPERIENCE:

Branch of Service: _____ From: _____ To: _____

Rank/Type of Service: _____

Job-Related Training/Experience: _____

RECORD OF EMPLOYMENT:

Please provide information related to your employment history. Include present employer if applicable as well as all previous employer for the past ten (10) years. Use the common area at the end of this section to account for any gaps in your employment. Please begin with your current or most recent employment.

Employer: _____ Telephone: _____

Address: _____

Position Title: _____ Supervisor: _____

Start Date: _____ Date Left: _____ Beginning Salary: _____ Ending Salary: _____

Duties: _____

Reason for Leaving: _____

Employer: _____ Telephone: _____

Address: _____

Position Title: _____ Supervisor: _____

Start Date: _____ Date Left: _____ Beginning Salary: _____ Ending Salary: _____

Duties: _____

Reason for Leaving: _____

Employer: _____ Telephone: _____

Address: _____

Position Title: _____ Supervisor: _____

Start Date: _____ Date Left: _____ Beginning Salary: _____ Ending Salary: _____

Duties: _____

Reason for Leaving: _____

WORK-RELATED REFERENCES: (Do not include relatives)

Name	Occupation	Years Known	Contact Information
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

STATEMENT (Please read this statement carefully before signing this application):

I hereby authorize the Innsbrook Corporation to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representatives for seeking, gathering, and using such information to make employment decisions and all other persons or organizations for providing such information. I understand that, in connection with the routine processing of this application and in conjunction with my subsequent employment, Innsbrook Corporation may request from a consumer-reporting agency an investigative consumer report, which may contain information as to my credit records, character, general reputation, and personal characteristics. Upon written request from me, Innsbrook Corporation, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either the employer or I can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that persons need for a reasonable accommodation as required by the ADA.

I understand that after an offer of employment and prior to reporting to work I may be subject to drug testing and that the offer of employment is contingent upon the results of the test. I further understand that the Company has a drug policy that provides for testing at anytime during employment; consent to and compliance with such policy is a condition of my employment; and continued employment is based on the successful passing of testing under this policy.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant signature: _____ Date: _____