



(PYC) APPLICATION FOR EMPLOYMENT

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

PERSONAL	Last Name			First	Middle	Date
	Street Address					Home Phone () —
	City, State, Zip					Business Phone () —
	Have you ever applied for employment with us? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes: Month and Year _____ Location _____					Social Security No.
	Position Desired					Pay Expected
	Apart from absence for religious observance, are you available for full-time work? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, what hours can you work? _____					Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Are you legally eligible for employment in the United States?					When will you be available to begin work? _____
	Other special training or skills (languages, machine operation, etc.)					
	How did you learn of our organization?					

EDUCATION	SCHOOL	NAME AND LOCATION OF SCHOOL	COURSE OF STUDY	NO. OF YEARS COMPLETED	DID YOU GRADUATE?	DEGREE OR DIPLOMA
	College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	High				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Elementary				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Other				<input type="checkbox"/> Yes <input type="checkbox"/> No	

MEMBERSHIP IN PROFESSIONAL OR CIVIC ORGANIZATIONS <i>(Exclude those which may disclose your race, color, religion or national origin)</i>	

EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with present or most recent employer.

1	Company Name	Telephone () -
	Address	Employed (State Month and Year) From To
	Name of Supervisor	Weekly Pay Start Last
	State Job Title and Describe Your Work _____	Reason for Leaving

2	Company Name	Telephone () -
	Address	Employed (State Month and Year) From To
	Name of Supervisor	Weekly Pay Start Last
	State Job Title and Describe Your Work _____	Reason for Leaving

3	Company Name	Telephone () -
	Address	Employed (State Month and Year) From To
	Name of Supervisor	Weekly Pay Start Last
	State Job Title and Describe Your Work _____	Reason for Leaving

4	Company Name	Telephone () -
	Address	Employed (State Month and Year) From To
	Name of Supervisor	Weekly Pay Start Last
	State Job Title and Describe Your Work _____	Reason for Leaving

5	Company Name	Telephone () -
	Address	Employed (State Month and Year) From To
	Name of Supervisor	Weekly Pay Start Last
	State Job Title and Describe Your Work _____	Reason for Leaving

<p>We may contact the employers listed above unless you indicate those you do not want us to contact.</p>	DO NOT CONTACT
	Employer Number (s) _____ Reason _____

M I L I T A R Y	<i>COMPLETE THIS SECTION IF YOU SERVED IN THE U.S. ARMED FORCES</i>	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

DO NOT ANSWER ANY QUESTION IN THIS SECTION UNLESS THE BOX IS CHECKED

If the employee has checked the box next to the question, the information requested is needed for a legally permissible reason, including, without limitation, national security considerations, a legitimate qualification or business necessity. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex or national origin. Federal law also prohibits discrimination on the basis of age with respect to certain individuals. The laws of most States also prohibits some or all of the above types of discrimination as well as some additional types such as discrimination based upon ancestry, marital status or physical or mental handicap or disability.

<input type="checkbox"/>	Provide dates you attended school:	<input checked="" type="checkbox"/> How long at present address? _____ years
	Elementary: From _____ To _____	
	High _____ To _____ College _____ To _____ Other (give name and dates) _____	
<input checked="" type="checkbox"/>	Do you have the legal right to work in the U.S.?	<input checked="" type="checkbox"/> How long at previous address? _____ years
<input checked="" type="checkbox"/>	What was your previous address? Are you over 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, employment is subject to verification of minimum legal age.	
<input checked="" type="checkbox"/>	Have you ever been bonded? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, with what employers? _____	
<input checked="" type="checkbox"/>	Have you ever been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by a court? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe in full. Have you ever had a DUI? Yes _____ No _____	
<input checked="" type="checkbox"/>	State names of relatives and friends working for us other than your spouse.	
<input checked="" type="checkbox"/>	Are you able to perform the primary duties of the job you are applying for?	

No applicant will be rejected as a result of disability that, with reasonable accomodation, does not prevent performance of the essential job duties.

PYC reserves the right to make changes in employment as it deems necessary or appropriate. PYC does not guarantee any length of time of employment. Employment is conditional and each employee must complete a 90 day probationary period at which time each employee will be reviewed and considered for further employment.

PYC or the employee may at any time terminate this relationship when either desires to do so.

S I G N A T U R E	I hereby declare the information provided by me in this Application for Employment is true, correct and complete to the best of my knowledge. I understand that if employed, any misstatement or omission of fact on this application shall be considered cause for dismissal. I authorize you to obtain an investigative consumer report containing information obtained through personal interviews with my neighbors, friends and acquaintances. This report, if obtained, may include information as to my character, general reputation, personal characteristics and mode of living. I understand I have the right to make a written request within a reasonable period to receive additional detailed information about the nature and scope of any such investigation.	
	_____	_____
	Date	Signature

FOR EMPLOYER'S USE ONLY

R E F E R E N C E C H E C K	EMPLOYER	PERSON CONTACTED	RESULTS
	1		
	2		
	3		
	4		
	5		

T E S T R E S U L T S	TESTS ADMINISTERED	RAW SCORE	RATING	ANALYSIS AND COMMENTS

I N T E R V I E W R E S U L T S	INTERVIEWER NAME AND COMMENTS	

SELECTFORM, INC. believes that the information solicited from the applicant which lies outside the special section on page 3 is in full compliance with all Federal and State equal employment laws and with the Fair Credit Reporting Act. We do not assume responsibility for the user's inclusion in this "Application for Employment" of any question which may violate Federal, State or local laws and users should consult their own counsel with respect to any legal questions concerning the use of this form.