

# North Tree Enterprises, Inc.

## EMPLOYMENT APPLICATION

### Personal Information

|   |  |  |             |                         |  |           |          |  |
|---|--|--|-------------|-------------------------|--|-----------|----------|--|
| First Name  |  |  | Middle Name |                         |  | Last Name |          |  |
| Present Address                                   |  |  |             | City                    |  | State     | Zip Code |  |
| Mailing Address <i>(if different from above.)</i> |  |  |             | City                    |  | State     | Zip Code |  |
| Primary Phone #                                   |  |  |             | Secondary Phone #       |  |           |          |  |
| Primary Email Address                             |  |  |             | Secondary Email Address |  |           |          |  |

### Employment Eligibility Requirements

|  |  |                  |  |                |       |                 |  |
|--|--|------------------|--|----------------|-------|-----------------|--|
| Are you legally eligible to work in this country? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Proof of eligibility is required after hire.)</i> |  |                  |  |                |       |                 |  |
| Are you 18 years or older? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If under 18 a work permit is required by state/federal law.)</i>         |  |                  |  |                |       |                 |  |
| Social Security #  |  | Driver License # |  | State of Issue | Class | Expiration Date |  |
| Can you read, speak, and write fluent English? <input type="checkbox"/> Yes <input type="checkbox"/> No  |  |                  |  |                |       |                 |  |

### Employment Desired / Availability

|   |  |                |  |  |
|---|--|----------------|--|--|
| Position Desired  |  | Salary Desired |  |  |
| Have you previously applied to this company? <input type="checkbox"/> Yes <input type="checkbox"/> No |  |                | If yes, when?  |  |
| How did you hear about this position?   |  |                |  |  |
| Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No                  |  |                | If yes, may we contact your employer? <input type="checkbox"/> Yes <input type="checkbox"/> No |  |

Date on which you are available to begin work

Can you perform the essential requirements of the position you are applying for, with or without reasonable accommodation?  Yes  No

*(The company complies with the ADA and state law and considers reasonable accommodation measures that may be necessary for eligible applicants and employees to perform essential functions.)*

## Criminal History

Besides the crime of possession of less than an ounce of marijuana for personal use more than two years ago, have you ever been convicted of an offense other than a minor traffic violation?  Yes  No

If yes, give date, place, offense and outcome:

## Education

### High School

|                 |  |
|-----------------|--|
| School Name     | City, State  |
| Years Completed | Graduated <input type="checkbox"/> Yes <input type="checkbox"/> No |

### Trade / Technical Schools or Certificate Programs

|                          |  |                           |
|--------------------------|--|---------------------------|
| School Name              | City, State  | Years Completed           |
| Subjects Studied / Major | Graduated <input type="checkbox"/> Yes <input type="checkbox"/> No | Degree / Certificate Type |

### College / University

#### School 1

|                          |   |                 |  |
|--------------------------|---|-----------------|--|
| School Name              | City, State   | Years Completed | Graduated <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Subjects Studied / Major | Degree Received <input type="checkbox"/> Associate <input type="checkbox"/> Bachelor's <input type="checkbox"/> Master's <input type="checkbox"/> Doctorate |                 |  |

School 2

|                          |                 |                                    |                                     |  |
|--------------------------|-----------------|------------------------------------|-------------------------------------|--|
|                          |                 |                                    |                                     | <input type="checkbox"/> Yes <input type="checkbox"/> No             |
| School Name              | City, State     | Years Completed                    | Graduated                           |  |
|                          |                 | <input type="checkbox"/> Associate | <input type="checkbox"/> Bachelor's | <input type="checkbox"/> Master's <input type="checkbox"/> Doctorate |
| Subjects Studied / Major | Degree Received |                                    |                                     |  |

School 3

|                          |                 |                                    |                                     |  |
|--------------------------|-----------------|------------------------------------|-------------------------------------|--|
|                          |                 |                                    |                                     | <input type="checkbox"/> Yes <input type="checkbox"/> No             |
| School Name              | City, State     | Years Completed                    | Graduated                           |  |
|                          |                 | <input type="checkbox"/> Associate | <input type="checkbox"/> Bachelor's | <input type="checkbox"/> Master's <input type="checkbox"/> Doctorate |
| Subjects Studied / Major | Degree Received |                                    |                                     |  |

Employment History *(List three previous employers, including present employer if currently employed.)*

Employer 1

|                            |                               |  |  |
|----------------------------|-------------------------------|--|--|
|                            |                               |  |  |
| Name / Address of Employer |                               |  |  |
| From:                      | To:                           |  |  |
| Dates of Employment        | Reason for Leaving            |  |  |
|                            |                               |  |  |
| Job Title                  | Beginning Salary              | Ending Salary  |  |
|                            |                               | <input type="checkbox"/> Yes <input type="checkbox"/> No |  |
| Supervisor Name            | May we contact for reference? | Phone #  |  |
|                            |                               |  |  |
| Description of Work        |                               |  |  |

Employer 2

|                            |                               |  |  |
|----------------------------|-------------------------------|--|--|
|                            |                               |  |  |
| Name / Address of Employer |                               |  |  |
| From:                      | To:                           |  |  |
| Dates of Employment        | Reason for Leaving            |  |  |
|                            |                               |  |  |
| Job Title                  | Beginning Salary              | Ending Salary  |  |
|                            |                               | <input type="checkbox"/> Yes <input type="checkbox"/> No |  |
| Supervisor Name            | May we contact for reference? | Phone #  |  |
|                            |                               |  |  |
| Description of Work        |                               |  |  |

Employer 3

|  |
|--|
|  |
|--|

Name / Address of Employer

|       |     |
|-------|-----|
| From: | To: |
|-------|-----|

Dates of Employment

Reason for Leaving

|  |  |  |
|--|--|--|
|  |  |  |
|--|--|--|

Job Title

Beginning Salary

Ending Salary

|  |  |  |
|--|--|--|
|  | <input type="checkbox"/> Yes <input type="checkbox"/> No |  |
|--|--|--|

Supervisor Name

May we contact for reference?

Phone #

|  |
|--|
|  |
|--|

Description of Work

Additional Skills and Information

Please list any special skills relevant to the job applied for:

|  |
|--|
|  |
|--|

Please list any professional licenses, certifications, training, or registrations:

|  |
|--|
|  |
|  |
|  |

Are you a veteran?  Yes  No

References *(List three business/work references who are not related to you.)*

Reference 1

|  |  |
|--|--|
|  |  |
|--|--|

Name

Relationship

|  |  |
|--|--|
|  |  |
|--|--|

Phone #

Years Known

Reference 2

|  |  |
|--|--|
|  |  |
|--|--|

Name

Relationship

|  |  |
|--|--|
|  |  |
|--|--|

Phone #

Years Known

Reference 3

|         |              |
|---------|--------------|
|         |              |
| Name    | Relationship |
|         |              |
| Phone # | Years Known  |

Applicant's Statement

*(Please carefully read the following applicant's statement before signing.)*

I certify that the information contained in this application and any attachments is true and correct to the best of my knowledge. I agree to have any of the statements checked by the company. I authorize my references and supervisors to provide information concerning my previous employment. I release all parties from any liability for damages that may result from furnishing such information, as well as from the use of or disclosure of such information by the company or its agents. I understand that any misrepresentation or material omission may result in my failure to receive an offer or, if I am hired, in my dismissal.

I UNDERSTAND AND AGREE THAT IF I AM HIRED MY EMPLOYMENT CAN BE TERMINATED AT WILL, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, EITHER AT MY OPTION OR AT THE OPTION OF THE COMPANY. No representative of the company other than the President has any authority to agree to the contrary. Further, the at-will nature of the employment may not be altered unless done so specifically in a written agreement signed by me and the President of the company.

I understand that all offers of employment are conditioned on my providing satisfactory proof of my identity and legal authority to work in the United States of America.

|                       |      |
|-----------------------|------|
|                       |      |
| Applicant's Signature | Date |

It is the company's policy to provide equal opportunity to all persons without regard to race, color, national origin, ancestry, sex, sexual orientation, age, religion, creed, physical or mental disability, medical condition, marital status, citizenship status, military service status, or other basis protected by law. This policy covers all facets of employment including, but not limited to, recruitment, training, selection, promotions, transfers, compensation, demotions, terminations, and all aspects of employment.

North Tree Enterprises, Inc. is a drug free workplace.