

EMPLOYMENT HISTORY

Starting with you present or most recent job, list all employment experience. Indicate the skills, knowledge and abilities, which best demonstrate your qualifications for the position you are applying for.

Employer _____ **Supervisor** _____
Address _____ **Phone** _____
Street City State Zip
Dates: From _____ To _____ **Hourly Rate / Salary:** Starting _____ Final _____
Name You Were Employed Under _____ **Job Title:** _____
Job Duties: _____

Reason for leaving: _____ Resigned Layoff Discharged
May we contact this employer? Yes No

Employer _____ **Supervisor** _____
Address _____ **Phone** _____
Street City State Zip
Dates: From _____ To _____ **Hourly Rate / Salary:** Starting _____ Final _____
Name You Were Employed Under _____ **Job Title:** _____
Job Duties: _____

Reason for leaving: _____ Resigned Layoff Discharged
May we contact this employer? Yes No

Employer _____ **Supervisor** _____
Address _____ **Phone** _____
Street City State Zip
Dates: From _____ To _____ **Hourly Rate / Salary:** Starting _____ Final _____
Name You Were Employed Under _____ **Job Title:** _____
Job Duties: _____

Reason for leaving: _____ Resigned Layoff Discharged
May we contact this employer? Yes No

If there are any other experiences, skills, or qualifications, including military, which you feel would especially qualify you for work at Fitz, Vogt & Associates, please indicate the type of experience, where this experience was acquired, and the length of time involved.

Why would you make a valuable employee to Fitz, Vogt & Associates?

PROFESSIONAL REFERENCES

List the name, address and telephone number of three references who are former supervisors and not related to you who would know your work history, work ethic, etc.

Name	Address	Telephone #
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Name	Address	Telephone #
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Name	Address	Telephone #
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APPLICANT ACKNOWLEDGMENT OF TERMS AND CONDITIONS OF APPLICATION

I certify that all information I have provided in this application and any other form, oral or written is true and accurate to the best of my ability. I agree that any misrepresentation, incomplete or false information is grounds for rejection of this application form, refusal to hire, withdrawal of an offer of employment, or immediate discharge without recourse, whenever and however discovered. I understand that you will rely on my statements to assist in making a decision on whether to hire me.

I certify and understand, that if employed by Fitz, Vogt & Associates, the initial 90 days of employment shall be considered an introductory period. I agree to abide by all rules and regulations of Fitz, Vogt & Associates and their client(s). I also understand that nothing in this employment application creates a contract of employment between Fitz, Vogt & Associates and me. If I am hired by Fitz, Vogt & Associates, my employment and compensation are "At Will" which means that my employment can be terminated by me or by Fitz, Vogt & Associates with or without cause or notice.

I understand and agree that Fitz, Vogt & Associates and its clients maintain a drug free workplace, that this is essential to the safety of the workplace, its employees and clients. I also understand and agree that a criminal background check may be required and, may include a fingerprinting requirement for some positions. I understand that, subject to law, Fitz, Vogt & Associates shall be the sole judge of the acceptability of any results. Failure to sign a consent form or cooperate with any testing procedure will result in termination of the hiring process or termination of employment.

I understand, that according to federal law, all individuals who are hired must, as a condition of their employment, produce certain documentations to verify their identity and United States citizen status or, if aliens, their legal authorization to work in the United States. As a consequence, I understand that any offer of employment to me is contingent upon my ability to produce the required documentation within the time period required by law.

I understand and agree that work schedules and requirements vary and can be unpredictable, and that, while Fitz, Vogt & Associates will make reasonable efforts to accommodate work schedules and employee availability, I may be required to work overtime, weekends, different shifts, or other arrangements. I consent to these requirements as necessary and legitimate conditions of employment.

Signature

Date

OPTIONAL – EEO DATA REPORTING FORM:

The federal government requires the following information to be collected for statistical reporting as part of the Affirmative Action Program. Your response is voluntary. Refusal to answer will not result in adverse treatment of any applicant. This information will not be considered as part of the application for employment.

Date: _____

Social Security # _____

Last Name _____ First Name _____

Position for which you are applying : _____

Sex Male Female

Race: (check appropriate box)

- Hispanic or Latino
- White (*Not Hispanic or Latino*)
- Black or African American (*Includes Jamaican, Bahamian and other Caribbean of African but not Hispanic or Arabian descent*)
- Native Hawaiian or Other Pacific Islander (*Not Hispanic or Latino*)
- Asian (*Not Hispanic or Latino*)
- American Indian or Alaskan Native (*Not Hispanic or Latino*)
- Two or More Races (*Not Hispanic or Latino*)

Other Status:

Disabled Veteran – Dates of Military Service: _____

Check the block for the highest level of education you have completed (check only one)

- Less than 8th grade
- Completed 8th grade
- Attended High School
- High School graduate or equivalent
- Attend college and/or associate degree
- College graduate
- Attended graduate school
- Master’s Degree
- Graduate study beyond master’s requirement
- PhD or professional degree

How did you find out about this job?

___ Friend ___ Relative ___ Newspaper ___ Recruitment ___ Website

Signature of Applicant

Date