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

Please specify your complete employment history, including self-employment and military service. Begin with your present or most recent employer and continue in reverse chronological order. You may attach additional sheets of paper.

| | | |
|----------|---|--|
| 1 | Name of employer | Telephone () |
| | Address _____ | Employed (State month and year) From To |
| | Job Title | |
| | Name of Supervisor | |
| | Job Title and Description of Your Work | Reason for Leaving |

| | | |
|----------|---|--|
| 2 | Name of employer | Telephone () |
| | Address _____ | Employed (State month and year) From To |
| | Job Title | |
| | Name of Supervisor | |
| | Job Title and Description of Your Work | Reason for Leaving |

| | | |
|----------|---|--|
| 3 | Name of employer | Telephone () |
| | Address _____ | Employed (State month and year) From To |
| | Job Title | |
| | Name of Supervisor | |
| | Job Title and Description of Your Work | Reason for Leaving |

| | |
|---------------------------|--|
| Name of employer | Telephone () |
| Address _____ | Employed (State month and year) From To |
| Job Title | |
| Name of Supervisor | |

| | |
|--|--------------------|
| Job Title and Description of Your Work | Reason for Leaving |
|--|--------------------|

| | |
|--|---------------------------------------|
| We may contact the employers listed above unless you indicate those you do not want us to contact. | |
| | Employer Number(s) _____ Reason _____ |

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| |
| Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| State names of relatives and friends working for us. |
| How were you referred to us for employment? |
| If applying for a specific position, how did you hear about this position? |

| Professional References | | | | |
|---|---------|-------------|---------------|-------|
| <i>List names of 3 persons not related to you, whom you have known professionally for at least 2 years.</i> | | | | |
| Name Known | Address | Tel #/Email | Title/Company | Years |
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |

| |
|---|
| Membership in Professional or Civic Organizations (List below) |
| |

(You need not disclose membership in professional organizations that may reveal information regarding race, color, creed, sex, religion, national origin, ancestry, age, disability, marital status, veteran status or any other protected status.)

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Uniset LLC to verify their accuracy and to obtain reference information on my work performance. I hereby release Uniset LLC from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accept that I will fully adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

Signature _____ Date _____

**This application for employment is good for 60 days only.
Consideration for employment after 60 days requires a new application. Please feel free to
add any additional information below that may be pertinent to this open position.**