## SUPERTANS APPLICATION FOR EMPLOYMENT

DATE:		•						
PERSONAL INFORMATIO	N (PLEASE PRINT OR T	TYPE ALL INFOR	MATION)					
NAME: LAST	FIRST			INITIAL	SOCIAL SECURI	TY NO		
CURRENT ADDRESS: STE	REET AND NUMBER	APT. I	<b>VO</b> .	CITY	STATE ZIP CO	DDE		
HOME TELEPHONE			BUSINE	SS TELEPHONE				
( )	· · · · · · · · · · · · · · · · · · ·		( )					
CAN YOU, UPON EMPLOYMENT	, SUBMIT VERIFICATION	N OF YOUR LEGA	AL RIGHT T	O WORK IN THE U	NITED STATES?	YES NO		
ARE YOU OF LEGAL AGE TO WORK? YES NO								
HAVE YOU EVER BEEN CONVICTED OF A FELONY WHICH HAS NOT BEEN EXPUNGED OR SEALED BY A COURT?* YES NO If YES, set forth the nature and dates of the conviction and date of release from prison:  *Record of conviction does not necessarily disqualify applicant from employment consideration								
POSITION DESIRED:	MINIMUI	M SALARY	DATE AVAILABLE:		SHIFTS PREFERRED:			
AVAILABLE TO WORK:	TEMPOR	RARY SUMM	IER	DAYS/HOURS AV	/AILABLE:			
EDUCATION				<u> </u>				
SCHOOL NAM	AE .	CITY & STATE		MAJOR OF STU	COURSE	HIGHEST GRADE COMPLETED		
HIGH SCHOOL								
COLLEGE								
BUSINESS, TECHNICAL/TRADE								
EXTRACURRICULAR ACTIVITIES:								
ACTIVITIES, HONORS, OFFICES HELD THAT ARE JOB RELATED:								
DESCRIBE OTHER JOB RELATED TRAINING COMPLETED:								
EMPLOYMENT HISTORY:								
COMPANY NAME	CITY & TELEPHONE NO.	POSITION	SÄLARY	EMPLO FROM -		REASON FOR LEAVING		
•								
	50 00/5 05500	<u> </u>						
COMPUTER EXPERIENCE? IF YES GIVE DETAILS.								
CASH REGISTER EXPERIENCE? IF YES GIVE DETAILS.								

REFERENCES				
GIVE THE NAMES OF THRE	E PERSONS TO WHOM YOU	ARE NOT RELATED AND BY V	VHOM YOU HAVE NOT BEEN	EMPLOYED:
NAME	ADDRESS	TELEPHONE	OCCUPATION .	YEARS KNOWN
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CONDITIONS FOR EM	PLOYMENT			
Please read the followin	g statements carefully as	they constitute conditions	s for employment with SU	IPERTANS:
1. The information that	I have provided on this ap	plication is accurate and	true to the best of my known	owledge.
2. I understand that any result in the refusal of er	misrepresentation or om mployment, or if employed	ission of a fact on my app d immediate termination f	olication or during the inter rom SUPERTANS emplo	orview process may syment.
authorized by me to veri requested by SUPERTA accepted with the same employers and other organisms or ora	ify the information I have to the following the arrive at an employ authority as the original ganizations from any liability and further waive and	provided and to provide Syment decision. I am will I hereby waive and releatily arising from reliance or release SUPERTANS from the control of the control o	ions or employers named SUPERTANS with informating that a photocopy of the se all persons, schools, on the disclosure of any of orn any liability arising from ormation within the conte	ation that may be his authorization be current and prior If the above information in reliance on the
4. I agree to protect SU not disclose to others at	IPERTANS' confidential in of said confidential info	nformation, trade secrets rmation.	, and names or addresse	s of clients, and I will
following conditions mai	NS makes every effort to ndatory: Overtime, shift was tand and accept these as	ork, a rotating work sche	preferences, business ne dule, or a work schedule yment.	eds may make the that includes Saturday
employment is at will, at the option of the com	nd that my employment ca	an be terminated with or v and that no one except th	ules and regulations. I unwithout good cause at any see President of SUPERTA ling must be in writing.	y time, tor any reason,
7. I understand that SU that the company retain	IPERTANS will not emplo s the right to screen from	y persons who use illegal employment such individ	l drugs and/or abuse alco uals.	hol or legal drugs, and
8. I will be able, if hired accordance with the Imiliating identity and employment	migration Reform and Cor	rized to work in the Unite ntrol Act that I will be requ	d States of America, <u>and</u> sired to provided timely do	understand that in ocumentiation of
Signature of Applicant			Date	

Thank you for taking the time to complete our Employment Application.

This Employment application will only be valid for 90 days from the date of the application. If you wish to be considered for employment subsequent to that date, a new application must be completed.