

EMPLOYMENT APPLICATION

PLEASE PRINT OR TYPE			Today's	Date:		
First Name	МІ		Last Name		Preferred	I Name/Nickname
Street Address	Apt#	City	Stat	e e		Zip Code
Home Phone	Alterna	ate/Work Phone		E	Email Addres	es
PLEASE PLACE A CHECK BY YOUR R	ESPONS	E OR PROVIDE	THE APPROPR	IATE INF	ORMATION	ı
Are you interested in:			Full Time	_	Part Time	Temporary
What schedule would you prefer?		Weekdays	Weekends		Evenings	Nights
How did you hear about the position?		Classified Ad	Friend (Nam	ne)	Radio	Internet
Desired Pay: Hourly Pay (Minimum, if applicable)		\$	Annual Pay	\$ Minimu	m	\$ Desired
When are you able to start work?		Date:		-		
In what local area do you prefer to wor	k?					
Position desired:						
PLEASE CHECK YES OR NO TO THE FOL	LOWING.	:				
Are you authorized to work in the United S	States?			Yes	No	
Federal law requires that employers hire only compliance with these laws, Barkman and Sr Company. In this connection, all offers of emauthorization, and it will be necessary for you employment authorization.	mith PT wiployment	rill verify the state are subject to ve	us of every individerification of the a	lual offere pplicant's	ed employme identity and	ent with the I employment
Are you under 18 years of age?				Yes	No	

Barkman & Smith PT is an equal opportunity employer and does not discriminate against any applicant or employee because of race, color, religion, sex, national origin, disability, age, or military or veteran status in accordance with federal law. In addition, Barkman & Smith PT complies with applicable state and local laws governing non-discrimination in employment in every jurisdiction in which it maintains facilities. Barkman & Smith PT also provides reasonable accommodation to qualified individuals with disabilities in accordance with applicable laws.

Yes

No

If yes, can you furnish a work permit?

			ctions of the job for able accommodatio		Yes No
PLEASE LIST YOU	IR WORK EXPE	RIENCE BE	LOW (MOST REC	ENT JOB	FIRST)
Massachusetts applica	ants may include	any verified wo	rk performed on a vo	lunteer ba	sis.
	COMPANY NAME			YOUR PO	OSITION and TITLE
FROM //	NO. & STREET			SUPERV	ISOR'S NAME, TITLE and POSITION
Month Year	CITY	STATE	ZIP CODE	SUPERV	ISOR'S TELEPHONE NUMBER
	TYPE OF BUSINE	SS			
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Month / Year	_ ()		VOLUNTA INVOLUN		
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	COMPANT NAME			TOOK PO	OSTITION and TITLE
FROM Month Year	NO. & STREET			SUPERV	ISOR'S NAME, TITLE and POSITION
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ТО	TELEPHONE NUM	/BER	TERMINATION		REASON
Month / Year	. ()		VOLUNTA INVOLUN		
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FROM	NO. & STREET			SUPERV	ISOR'S NAME, TITLE and POSITION
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	CITY	STATE	ZIP CODE	SUPERV	ISOR'S TELEPHONE NUMBER
	TYPE OF BUSINESS	<u> </u> S	<u> </u>		
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/	()		VOLUNTAR		
Month Year			INVOLUNTA	ARY	
	BRIEFLY DESCRIBE	YOUR MAJOR DUTI	I <u>ES</u> AND <u>REASON(S) F</u>	FOR TERMI	I <u>NATION</u>

EDUCATION:

NAME AND ADDRESS OF SCHOOL	MAJOR SUBJECT	DID YOU GRADUATE?	TYPE OF DEGREE OR DIPLOMA
HIGH SCHOOL OR PREP			
COLLEGE			
COLLEGE OR GRADUATE			
OTHER			

PROFESSIONAL DESIGNATIONS:

DESIGNATION	ORGANIZATION GRANTING DESIGNATION	DATE COMPLETED
DESIGNATION	ORGANIZATION GRANTING DESIGNATION	DATE COMPLETED

PROFESSIONAL LICENSES:

TYPE OF LICENSE	STATE GRANTING LICENSE	LICENSE NUMBER
TYPE OF LICENSE	STATE GRANTING LICENSE	LICENSE NUMBER

REFERENCES: Please list three professional references

NAME	RELATIONSHIP	COMPANY	PHONE/ALTERNATE PHONE

PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION

I have submitted the attached form to the company for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the company to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from the Company's employ.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with the Company in the position I am seeking.

I understand that this application is not an employment contract for any specific length of time between the Company and me, and that in the event I am hired, my employment will be "at will" and either the Company or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy and the like, distributed by the Company to its employees is intended to or can create an employment contract, an offer of employment or any obligation on the Company's part. The Company may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any benefit, policy practice, condition or process affecting its employees.

<u>References</u>: I hereby authorize the company and its agents to make such investigations and inquiries into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquires connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications.

<u>Temporary/Contract Employment</u>: If employed as a temporary or contract employee, I understand that I may be an employee of the company and not of any client. If employed, I further understand that my employment is not guaranteed for any specific time and may be terminated at any time for any reason. I further understand that a contract will exist between the company and each client to whom I may be assigned which will require the client to pay a fee to the company in the event that I accept direct employment with the client, I agree to notify the company immediately should I be offered direct employment by a client (or by referral of the client to any subsidiary or affiliated company), either for a permanent, temporary (including assignments through another agency), or consulting positions during my assignment or after my assignment has ended.

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SIGNED: DATE:	