

Snelling Staffing Services

Pre-employment Drug
Screening & Background
Screening ARE required.

Employment Application

Interviewer's Initials: _____

Today's Date: _____

User Status: E+ E E- F

Last Name:	First Name:	Middle Name:	
Street Address:	City:	State:	Zip:
Home Phone:	Work Phone:	Cell Phone:	
Email Address:	Emergency Contact Person:	Phone:	
Salary Desired:	Minimum Salary:	Date Available:	
What jobs would you be most interested in?			

How did you hear about Snelling? _____

What made you decide to come put in an application with us? _____

Are you willing to travel?

Yes:
No:

If yes, how far?

Are you willing to work:

Days:	Mon:	Fri:
Evenings:	Tues:	Sat:
Nights:	Wed:	Sun:
Overnight:	Thur:	

Have you ever been convicted of, pled guilty to, received deferred adjudication, or been on any form of diversion for any criminal offense misdemeanor or felonies?

Yes:
No:

Have you ever been bonded?

Yes:
No:

Note: Each instance will be considered in relation to the position for which you are applying.

Valid driver's license?

State: _____

Employment:

Last / current Employer:

Industry:

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Address:

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Employed from (date):

to

--	--

Position:

Salary:

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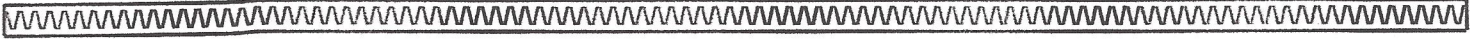
Supervisor:

Phone Number:

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Reason for leaving:

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Previous Employer:

Industry:

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Address:

--

Employed from (date):

to

--	--

Position:

Salary:

--	--

Supervisor:

Phone Number:

--	--

Reason for leaving:

--



Previous Employer:

Industry:

--	--

Address:

--

Employed from (date):

to

--	--

Position:

Salary:

--	--

Supervisor:

Phone Number:

--	--

Reason for leaving:

--

Education:

Name of School(s):	Degree / Diploma / GED	Date of Degree / Diploma / GED

References:

List the name and phone number of three co-workers that are NOT related to you:

	Name:	Phone Number:	Where you worked together:
1			
2			
3			

* I hereby affirm that the information I have provided on this form is true and complete. I understand that providing false, incomplete or misleading information to the company will result in cancellation of this form or refusal of employment.

* I understand that if I am employed by Snelling on a temporary basis while pursuing my job search, such employment will be on an "employee at will" basis, which means that I and Snelling are free to terminate my employment at any time, with or without prior notice, except as may be required by law.

* I consent to submit to testing for the detection of illegally used drugs or controlled substances.

* I understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

* I understand that you may obtain information about my character, reputation, personal characteristics, criminal history and financial responsibility in order to evaluate me as a prospective employee. Some clients may, as a condition of using Snelling's services, require additional information relevant to a particular job or assignment, and may request copies of certain information obtained. I hereby authorize you to make inquiries of my previous employers, educational institutions, personal acquaintances and references about these matters through personal interviews or other means if required by a Snelling client to provide such information to them. Upon written request, additional information as to the nature and scope of the report, if one is made, will be provided.

* I agree to dissolve any dispute, claim or controversy that may arise between Snelling regarding failure to be hired or termination from employment exclusively in accordance with the Snelling Dispute Resolution Policy, including mediation and binding arbitration of all such disputes.

* I represent and warrant that I have fully read and completely understand the foregoing and seek employment under the conditions specified.

Signature:

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Date:

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Snelling Staffing Services

Phone: 575-762-4246
Fax: 575-762-4628
3700 N. Prince Street, Suite C
Clovis, NM 88101

REFERENCE CHECK REQUEST REFERENCE CHECK AUTHORIZATION & DISCLOSURE STATEMENT

* I understand that you may obtain information about my character, reputation, personal characteristics, and financial responsibility in order to enable you to evaluate me as a prospective employee. I hereby authorize you to make inquiries of my previous employers, educational institutions, personal acquaintances, and references about these matters through personal interview or other means.

* I understand that, upon written request, I will be notified as to the nature and scope of such investigations and inquiries.

* I acknowledge that I have read this statement:

Printed Name:
Signature:
Date:

Please fax this form to: _____

Attention: _____ Date: _____

Company Name: _____

Mr/Mrs/Ms _____ is seeking employment and has listed you as a former employer.
Please verify the information below and complete the rest of this form.

Position(s) held: _____ Employed from: _____ to: _____

Reason for leaving: _____

	Very Good	Good	Fair	Poor
Job Performance:	[]	[]	[]	[]
Attendance & Punctuality:	[]	[]	[]	[]
Accepts Responsibility:	[]	[]	[]	[]
Gets along with others:	[]	[]	[]	[]
Dependability:	[]	[]	[]	[]

Remarks (i.e strong points, weaknesses, areas needing improvement) :

Were you his / her direct supervisor? [] YES [] NO

Would you rehire if you had an opening? [] YES [] NO

Additional comments:

Signature: _____ Title: _____ Date: _____

Snelling Staffing Services

* Criminal background checks will be conducted for all applicants. Credit history reports will be generated and considered if requested by a specific client.

CONSUMER CREDIT REPORTING REFORM ACT OF 1996 CONSUMER CREDIT DISCLOSURE / AUTHORIZATION RELEASE FORM

I hereby authorize Snelling Employment, LLC, dba Snelling and Snelling Services, LLC, dba Snelling (Snelling) and its designated agents and representative to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment purposes.

I understand that the scope of the consumer report/investigative report may include, but is not limited to, the following areas:

Verification of social security number, current and previous residences, employment history including all personnel files; education including transcripts, character references; credit history and reports; criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; birth records; motor vehicle records to include traffic citations and registration; and any other public record or to conduct interviews with third parties relative to my character, general reputation, personal characteristics or mode of living.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me to Snelling or its agents or clients where I maybe assigned to work. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agent may have, to include information or data received from other sources.

I hereby release Snelling, the Social Security Administration, and its agents, officials, representatives, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may at any time, result to me, my heirs, family, or associated because of compliance with this authorization and request to release.

Print Name:

First

Middle

Last

Former Name(s):

Current Address:

Date From:

To:

Previous Address:

Date From:

To:

Previous Address:

Date From:

To:

Date of Birth (for ID purposes only):	Soc Sec Number:
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Driver License Number/State:	Telephone number:
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Signature:	Date:
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