

EMPLOYMENT APPLICATION

APPLICANT INFORMATION											
Last Name			First				M.I.				
Have you ever used another name? If so, what?											
Physical Address						Apartment/Unit #					
City			State			ZIP					
Mailing Address											
City			State			ZIP					
Phone			E-mail Address								
Date of Birth		Social Security No.			Desired Salary						
Date Available for Work		Position Applied for									
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?							
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain							
If so, when?											
If necessary for the job, I am able to:				Provide a valid Driver's License?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Issuing State:	
Work Overtime?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Endorsements:							

EDUCATION									
High School			Address						
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
College			Address						
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
Trade School			Address						
From	To	Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			

SKILLS & QUALIFICATIONS
Other qualifications such as special skills, abilities, or honors that should be considered:
Types of computers, software or other equipment you are qualified to operate or repair:

Professional licenses, certifications, or registrations:

Additional skills, including supervision skills, other languages or information regarding the career/occupation you wish to bring to the employers attention:

PREVIOUS EMPLOYMENT

Company		Phone	()		
Address		Supervisor			
Job Title		Starting Salary	\$	Ending Salary	\$
Responsibilities					
From		To		Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Company		Phone	()		
Address		Supervisor			
Job Title		Starting Salary	\$	Ending Salary	\$
Responsibilities					
From		To		Reason for Leaving	
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>		

REFERENCES: LIST THREE PROFESSIONAL REFERENCES.

Full Name		Relationship	
Company		Phone	()
Address			
Full Name		Relationship	
Company		Phone	()
Address			
Full Name		Relationship	
Company		Phone	()
Address			

CONTACT: LIST TWO PERSONAL REFERENCES WHO YOU ARE NOT RELATED TO OR FORMER SUPERVISORS

Name	Address	Phone	Occupation	Years Known

DISCLAIMER AND SIGNATURE: PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize American Tax Company, LLC. to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If requested, I agree to submit to a physical exam, criminal and credit background investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that staff employees of American Tax Company, LLC. serve at-will, and the employment relationship may be terminated at any time by either party, or any or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States, and to comply with company and departmental regulations. I understand that if employed on a temporary basis, I would be paid for hours worked only, and would be ineligible for benefits including paid time off. I understand that the first FOUR MONTHS of regular employment represent a provisional period, during which I would not be eligible to apply for transfer or promotion and during which I may be terminated without right of appeal.

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature _____ Date _____