Employment Application



Date: _____

The Research and Evaluation Group is an equal opportunity employer and will not discriminate in the hiring process on the basis of race, color, gender, national origin, age, disability or handicap, genetic information, veteran status, uniformed service status, or any other characteristics protected by law.

Last Name	Fir	rst Name		Middle Name	
No. & Street of Present Ad	dress Cit	ty		State	Zip Code
Home Phone	Ce	ell or Business P	hone E-ma	ail Address	
		EMPLOYMI	ENT DESIRED		
Position Applying for:					
Referred By:			1		
Are you applying for Regul	ar Full-Time wor	k?	Are you app	olying for Regular Par	t-Time work?
What days and hours are you available to work?					
Are you available on the weekends? Would you be available to work overtime, if necessary?					
If hired, on what day can y	ou start work?			Salary desired: \$	per
		PERSONAL I	NORMATION	N	
If hired, would you have reliable means of transportation to and from work?					
Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age).					
If hired, can you present evidence of your U.S. citizenship or proof of your legal right to work in this country?					
Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation?					
If no , describe the functions that cannot be performed: (Note: We consider reasonable accommodation measures that may be necessary or eligible applicants/employees to perform essential functions.)					
Have you ever been convicted of a criminal offense (felony or serious misdemeanor)?					
If yes , state the nature of the crime(s), when and where convicted, and disposition of the case: (Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s)					

applied for may, however, be considered.)

	EMPLOYME	NT HISTORY	
		our most recent employer. Atto	
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CURRENT or LAST EMPLOYER	₹	_	_
		/ to) /
Employer	Telephone No.	Dates of Employment (Mon	th/Year to Month/Year)
T (D :		Ş (A.)	
Type of Business	Supervisor's Name	Pay (\$ per F	lour or Year)
No. & Street Address	City	State	Zip Code
No. & Street Address	City	State	Zip Code
Position & Duties			
rosition & Duties			
Reason for Leaving			
May we contact your current	or former supervisor for a re	ference? :	
EMPLOYER			
		/ to	o /
Employer	Telephone No.	Dates of Employment (Mon	th/Year to Month/Year)
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		Ş	3
Type of Business	Supervisor's Name	Pay (\$ per Hour or Year)	
No. & Street Address	City	State	Zip Code
Position & Duties			
December Leaving			
Reason for Leaving			
May we contact your former	supervisor for a reference?		
EMPLOYER	supervisor for a reference: .		
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		/ to	o /
Employer	Telephone No.	Dates of Employment (Mon	•
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Type of Business	Supervisor's Name		lour or Year)
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No. & Street Address	City	State	Zip Code
	-		

Position & Duties	Position & Duties				
. 55.05.1 & 540.65					
Reason for Leaving					
May we contact your former supervisor for	a reference? :				
EDU	CATION, TRAINING & I	EXPERIENCE			
Starting with your most recent school attend	ded, provide the followi	ng information:			
School (include City & State)	Years Completed?	Did you Graduate?	Degree or Diploma		
Do you have any other experience, training, qualifications, or skills which you feel make you especially suited for work at EvalGroup?					
If yes, please explain:					
Answer the questions in this section	if you are applying for	a position requiring lice	ensing or certification		
Assess Brown day 195 of Control of the					
Are you licensed/certified for the job you ar	e applying for?				
Name of license/certification:					
Issuing State: License/Certification Number:					
Has your license/certification ever been revoked or suspended?					
If yes, state reason(s), date of revocation	n or suspension, and da	ate of reinstatement:			
If yes, state reason(s), date of revocation or suspension, and date of reinstatement:					
MILTARY SERVICE					
Have you obtained any special skills or abilities as the result of service in the military?					
If yes, please describe:					
	DEFERENCES				
REFERENCES					
List below two persons unrelated to you who have knowledge of your work performance within the last three years:					
Last Name	First Name		Telephone Number		
			•		

Occupatio	on Numl	ber of Years Acquainted	
Last Name	ie First	Name	Telephone Number
Occupatio	on Numl	ber of Years Acquainted	
·		·	
Please rea	ead carefully, initial each paragraph and sign b	pelow:	
	,, , , , , , , , , , , , , , , , , , ,		
	I hereby certify that I have not knowingly w	·	
	chances for employment and that the answ knowledge. I further certify that I, the unde		· · · · · · · · · · · · · · · · · · ·
	I understand that any omission or misstater		
	used to secure employment shall be ground		• • • • • • • • • • • • • • • • • • • •
	if I am employed, regardless of the time ela	psed before discovery.	
	I hereby authorize The Research and Evalua	tion Group to thoroughly	investigate my references, work
	record, education and other matters related		· ·
	references I have listed to disclose to the corelated to my work records, without giving I		-
	the company, my former employers and all	•	· · · · · · · · · · · · · · · · · · ·
	from any and all claims, demands or liabilities	es arising out of or in any	way related to such investigation or
	disclosure.		
	I understand and agree that, if hired, my em		
	employment at any time for any reason or f	•	•
	Group may terminate any employee's employment at anytime for any reason or no reason, without notice.		
	Should a search of public records (including	records decumenting an	arrect indictment conviction civil
	judicial action, tax lien or outstanding judgn	_	
	Research and Evaluation Group, I am entitle		
	Research and Evaluation Group unless I mai		
	information, I am entitled to a copy of any s	such records even though	I have checked the box below
	☐ I waive receipt of a copy of any public re	cord described in the par	agraph above.
			<u> </u>
	I understand that The Research and Evaluat	ion Group is a drug free s	and alcohol-free workplace and can
	screen for illegal drug use before hiring and		
		- 1	•

This application will remain active for 90 days. After which time, you must reapply to be considered for employment with EvalGroup.

Applicant's Signature:	Date: