



Employment Application

APPLICANT INFORMATION				
Last Name	First	M.I.	Date	
Street Address			Apartment/Unit #	
City	State	ZIP		
Phone	Alternate/Cell Phone	E-mail Address		
Date Available	Social Security No.	Desired Salary		
Position Applied for				
How did you hear about this position? Newspaper <input type="checkbox"/> Other <input type="checkbox"/> (please describe)				
Are you legally authorized to work in the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	I understand if I am hired, I will be required to provide proof of eligibility to work in United States.
Are you over the age of 18?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you at least 16 years old, and can furnish the required work permits?
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
List any relatives that work for this company				
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Note: a felony conviction may not prevent consideration for employment.
If YES, please indicate date(s) and nature of conviction(s):				

EDUCATION					
	Name & Location of School	Years Attended	Course of Study	Highest Level Completed	Did you graduate?
High School					
College					
Trade or Technical School					
Graduate or Professional Studies					

REFERENCES				
Please list the names, addresses & contact information for at least three professional references not related to you by birth or marriage.				
Name	Company	Position or Nature of Relationship	Phone	E-mail Address

EMPLOYMENT HISTORY

Please complete the following in its entirety, listing your current or most recent employer first. Please utilize the back page if additional space is required. Your resume may be included as an attachment; however the information requested below is required to complete this application

	Last Employer		Previous Employer		Previous Employer		Previous Employer	
Employer Name								
Street Address								
City/State/Zip								
Phone Number								
Dates of Employment	From	To	From	To	From	To	From	To
Position/Job Title								
Supervisor Name								
May we contact this employer?	Yes	No	Yes	No	Yes	No	Yes	No
Starting Salary								
Ending Salary								
Primary Responsibilities								

"I certify that all the above information and any resume I submit is true and complete. I understand that any misrepresentation or omission may result in my disqualification from further consideration for employment or my termination from employment. I further understand that this application is not nor intended to be a contract of employment, nor does this application obligate AHEAD Inc. in any way if I am hired. I understand and agree that my employment is at-will and can be terminated at any time by either party with or without notice, for any reason or for no reason.

Further, in order that AHEAD Inc. may process my application for employment, I hereby authorize AHEAD Inc. and its subsidiaries, officers, directors, employees, representatives, and agents (hereinafter collectively referred to as "AHEAD") to conduct a complete investigation into my background including, but not limited to, inquiring into my entire employment history, including my fitness for duty at all prior employment; education history; credit history; criminal record and military record, if any; to obtain opinions and references regarding my moral character and reputation and to solicit and obtain any other information AHEAD, in its sole discretion, deems as necessary to determine my eligibility for employment or for the purposes of confirming the accuracy or completeness of any information I have provided AHEAD. I further understand that should I become employed by AHEAD Inc., AHEAD may at any time during my employment at AHEAD Inc. may update such investigation. In consideration for the processing of my application for employment with AHEAD Inc., I hereby release, indemnify, and hold harmless AHEAD from any and all liability based on their authorized receipt, disclosure, and use of the information gathered in processing my application for employment.

I understand that, if hired, any offer is contingent upon production of proof of employment eligibility and the completion of a Form I-9."

Print Name _____ Social Security # _____

Signature _____ Date _____