

EMPLOYMENT APPLICATON

(PLEASE PRINT)

P	E	R.	50	I	VA	\ <i>L:</i>

				Dat	e:	/	/
Last Name:		First Nar	ne:			Middle I	nitial:
Last Name: Middle Initial: Address:							
City: State: Zip code: Home Phone: () Cell Phone: ()							
Home Phone: ()_			Cell Pho	ne: (_)		
Position Applying For: _							
Can you perform the ess	sential funct	ions of the p	osition you a	re applyi	ng? Ye.	s []No	[]
If no, please explain (If yo applying, please ask the intervie				olicable to th	e positio	n for which	you are
When would you be ava	ilable to beg	gin work?					
Are you legally eligible t	o be employ	ed in the Un	ited States?	Yes[]N	o[]		
(Proof of identity and eligibility	to be required up	pon employment	t)				
Are you over the age of	18 years? Ye	es [] No [](If no, you may	be required	to provid	e authoriza	ation to work.)
Have you ever worked f	or Nicklas Su	ipply before	? Yes[] I	Vo[]			
If yes; Where?	If yes; Where?When (Give dates)Job Title:						
Do you have any relativ	es or friends	who work fo	or Nicklas Su _l	pply? Yes	[] N	o[]	
If yes; Name and Where	do they wo	rk?					
Are you available to wo					e[]		
		•	urs Available				
Day Sunday	oyed, notification Monday	n must be provid Tuesday	ed in writing sho Wednesday	uld availabili Thursday		es.) Friday	Saturday
From:	Wionady	racsaay	Wednesday	marsaay		Hady	Saturady
То:							
Are you presently emplo	oyed Yes []	No[] If yes	, may we cor	ntact your	emplo	yer? Ye:	s [] No []
Do you belong to any pr	ofessional, t	trade, busine	ess or civic or	ganizatio	ns that	t deal wi	th the
position for which you a	re applying?	Yes[] No	[]				
If yes, please explain and list offices held: (Omit any organization which reflects your race, color, religion, age,							
sex, sexual orientation, marital		•	· -	•	•	•	, , ,



EDUCATION:

	Name of School	Course of Study	# of Years	Diploma/Degree
			Completed	Received
High School				
College				
Vocational or				
Trade School				
Graduate				

	_
If yes, please describe:	
position in which you are applying? Yes [] No []	
Have you completed any special courses, seminars and/or training directly related to the	

EMPLOYMENT HISTORY:

Name of Employer		Telephone Number		
Full Address (Including Street, City, State, & Zip)		Supervisor's Name and Title		
Dates Employed		Rate of Pay	Rate of Pay	
From: Month/Day/Year	To: Month/Day/Year	Beginning	Final	
Still Employed:	May we contact your	Job Title:	Reason for leaving:	
Yes [] No []	employer:			
	Yes [] No []			
Were you discharged or Describe the work performed?				
terminated by the employer?				
Yes [] No []				

EMPLOYMENT HISTORY CONTINUED ON NEXT PAGE



SUPPLY

			T			
Name of Employer		Telephone Number				
Full Address (Including Street,	City, State, & Zip)	Supervisor's Name an	nd Title			
Dates Employed		Rate of Pay	Rate of Pay			
From: Month/Day/Year	To: Month/Day/Year	Beginning	Final			
. ,,	, ,,					
Still Employed:	May we contact your	Job Title:	Reason for leaving:			
Yes [] No []	employer:		, , , ,			
7.63[] 7.40[]	Yes [] No []					
Were you discharged or	Describe the work perform	ed?	1			
terminated by the employer?						
Yes [] No []						
-						
Name of Employer		Telephone Number				
Full Address (Including Street,	City, State, & Zip)	Supervisor's Name ar	Supervisor's Name and Title			
Dates Employed		Rate of Pay	Rate of Pay			
From: Month/Day/Year	To: Month/Day/Year	Beginning	Final			
. ,	. ,					
Still Employed:	May we contact your	Job Title:	Reason for leaving:			
Yes [] No []	employer:	Job Title.	neuson joi leuving.			
163[] NO[]	Yes [] No []					
Were you discharged or	Describe the work perform	ed?				
terminated by the employer?						
Yes [] No []						
	_					
<u>MILITARY SERVIC</u>	<u>E:</u>					
Branch:	Date Entered:	Date D	ischarged:			
Do you have the service-	-related skills applicab	ole to civilian employ	vment? Yes [] No []			
If yes, please describe:		. ,	· ·			
., , =0, p. 00.00 000011001						



REFERENCES:

Please give three references at least one previous work reference

Name	Occupation
Address	Telephone Number
Relationship to you	
, ,	
Name	Occupation
Name	Occupation
Address	Talanhana Numbar
Address	Telephone Number
Deletienskip te ver	
Relationship to you	
Name	Occupation
Address	Telephone Number
Relationship to you	
•	



IMPORTANT - PLEASE READ AND SIGN ALL:

Nicklas Supply/SPLASH is an Equal Opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, age, disability, protected veteran status, national origin, or any other characteristic protected by applicable law.

This employment application (and accompanying resume, if any) are true and correct to the best of my knowledge, and I agree and understand that any misrepresentation or falsification of information or omission of information during the employment application process may disqualify me from further consideration for employment and, if employed, may subject me to dismissal. I further certify that I am a true and bona fide job applicant, honestly interested in working in the position(s) for which I have applied, and I am seeking employment with Nicklas Supply solely to provide me with the benefits of a job and for no other purpose. I understand that if I am hired, my employment is for no definite time, I am an At Will Employee and may be terminated at any time without prior notice.

Signature	Date
DRUG & ALCOHOL TESTING:	
I,	, do hereby agree to submit to testing to be
performed for detection of drugs and a Nicklas Supply Company.	lcohol. I give permission for test results to be released to
or test sample will result in a withdraw	fusal to be tested, or any attempt to affect the test results val of my application for employment, of any provisional ved from Nicklas Supply or termination of my employment,
Signature	Date
BACKGROUND CHECK:	
l, part of the hiring process for Nicklas Sup	, do hereby agree to have a background check run as aply Company.
Signature	 Date