



ADVANCED OUTSOURCE SOLUTIONS

APPLICATION FOR EMPLOYMENT

Advanced Outsource Solutions is an equal opportunity employers and will consider all applicants for all positions equally without regard to their race, sex, age, color, religion, national origin, veteran status or any disability as provided in the Americans with Disabilities Act. This application will be given every consideration, but its receipt does not infer that the applicant will be employed. Each question should be answered in a complete and accurate manner as an incomplete application may be denied consideration.

Name: _____ Date: ____/____/____
FIRST MIDDLE Last

Home Phone:(____) _____ - _____ Cell Phone: (____) _____ - _____ Email: _____

Present Address: _____
NO. STREET CITY STATE ZIP CODE

Social Security No. _____ Are you over 18? ___Yes ___No

Are you a U.S. citizen or do you have the legal right to be employed in the United States? ___Yes ___No

Have you ever been convicted of any crime (misdemeanor or felony) ?

___Yes ___No

If yes, list each conviction, location, date and the outcome or sentence

Note: A conviction will not necessarily disqualify you for employment. There is no obligation to disclose court sealed or expunged records.

Position Applying For: _____

Do you have the ability, with or without reasonable accommodations, to perform the essential functions of the position for which you are applying? ___Yes ___No

If No, please explain _____

Are you seeking ___Full-time ___Part-time ___Temporary

Are you available to work: ___Weekends ___Evenings ___Midnights ___Changing Shifts

Are there any days or hours you would be unable or unwilling to work? ___Yes ___No

If yes, please specify _____

How did you learn of our company and/or position? (name of referring person / name of posting or advertiser / job fair / company sign / other) _____

EDUCATION: Circle the highest grade completed: 10 11 12 13 14 15 16 17 18 19

If hired, could you furnish proof of a High School Diploma or G.E.D.? ___Yes ___No

List the name and address of high school, college, university, technical school: _____

List any completed degrees, certificates, licenses: ~~etc.~~ _____

MILITARY SERVICE: Have you ever served in the military? ___Yes ___No

Service Branch _____ Date Entered ____/____/____

Date Separated ____/____/____ Final Rank _____

EMPLOYMENT EXPERIENCE: (List in order from most recent employment)

Current or Most Recent Employer: _____

Job Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) ____ - _____ Supervisor: _____

Duties: _____

Reason for leaving: _____

Dates Employed: From: ____/____/____ to ____/____/____ Wage: _____

Employer: _____ Job Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) ____ - _____ Supervisor: _____

Duties: _____

Reason for leaving: _____

Dates Employed: From: ____/____/____ to ____/____/____ Wage: _____

Employer: _____ Job Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (____) ____ - _____ Supervisor: _____

Duties: _____

Reason for leaving: _____

Dates Employed: From: ____/____/____ to ____/____/____ Wage: _____

REFERENCES: Give three references, preferably co-workers or friends:

Name Phone Relationship Years Known

1 _____

2 _____

3 _____

APPLICANT'S STATEMENT:

I certify that answers given herein are true and complete to the best of my knowledge. I understand that I am not obligated to disclose court sealed or expunged records of conviction or arrest.

I authorize investigation of all statements contained in this application for employment as may be deemed necessary on arriving at an employment decision.

I hereby authorize Advanced Outsource Solutions. to contact any company, school, institution, or individual it deems appropriate to investigate my employment history, character and qualifications and I give my full and complete consent to their revealing any and all information they wish as a result of this investigation. In addition, I hereby waive my right to bring cause of action against these individuals for defamation, invasion of privacy or any other reason because of their statements.

I agree, if I am employed, that I will abide by all the rules and regulations of the company, including compliance with company drug free workplace policy. I understand that my taking of drug and alcohol tests, when given pursuant to company policy, are a condition of continued employment and refusal to take such tests when asked will be grounds for my immediate termination.

I certify that I have never been terminated from employment or convicted of a crime due to unauthorized physical contact, abuse or neglect of a person with a disability, child or elderly person.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by a written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this company. Nothing on this application is intended to create or infer a contractual relationship.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge.

This application for employment shall be considered active for a period of time not to exceed six months.

_____/_____/_____
Signature of Applicant Date

EQUAL OPPORTUNITY/ AFFIRMATIVE ACTION DATA REQUEST

The completion of the following information is optional. This information will be used for statistical purposes only and will not affect a final decision regarding employment.

Gender: (Please check one)

- Female
 Male

Disability Information: (check one)

- Person with a disability
 Person without a disability

Race / Ethnic Information: (Please check one)

- White
 Black or African American
 Hispanic or Latino
 Asian
 American Indian or Alaskan Native
 Native Hawaiian or Other Pacific Islander
 Two or More Races

Veteran Status: (please check any that apply)

- Disabled Veteran *(A veteran who is entitled to compensation or who was discharged or released from active duty because of a service connected disability)*
- Armed Forces Service Medal Veteran *(A veteran who while serving in an active duty military operation was awarded an Armed Forces service medal pursuant to Executive Order 12985)*
- Recently Separated Veteran *(A veteran who ended active duty within the last 3 years)*
- Other Protected Veteran *(A veteran who served active duty during a war, campaign or expedition where a campaign badge has been authorized)*

Name: _____ Date: _____

Position Applied For: _____



ADVANCED OUTSOURCE SOLUTIONS

Pre-Offer Invitation to Self-Identify

1. This employer is a Government contractor subject to the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended by the Jobs for Veterans Act of 2002, 38 U.S.C. 4212 (VEVRAA), which requires Government contractors to take affirmative action to employ and advance in employment: (1) disabled veterans; (2) recently separated veterans; (3) active duty wartime or campaign badge veterans; and (4) Armed Forces service medal veterans. These classifications are defined as follows:

A “**disabled veteran**” is one of the following:

- a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs; or
- a person who was discharged or released from active duty because of a service-connected disability.
- A “**recently separated veteran**” means any veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval, or air service.
- An “**active duty wartime or campaign badge veteran**” means a veteran who served on active duty in the U.S. military, ground, naval or air service during a war, or in a campaign or expedition for which a campaign badge has been authorized under the laws administered by the Department of Defense.
- An “**Armed forces service medal veteran**” means a veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.

2. If you believe you belong to any of the categories of protected veterans listed above, please indicate by checking the appropriate box below. As a Government contractor subject to VEVRAA, we request this information in order to measure the effectiveness of the outreach and positive recruitment efforts we undertake pursuant to VEVRAA.

I identify as one or more of the classifications of protected veteran listed above

I am not a protected veteran

Printed Name

Date

Signature