

Application for Employment



PLEASE PRINT

Equal access to programs, services, and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify the interviewing manager.

Full Legal Name _____ Date of Application _____

Address _____ Social Security # _____

Home Phone _____ Cell Phone _____ E-mail _____

Have you ever been employed here before? If yes, give dates and position: Yes No

Are you legally eligible for employment in this country?..... Yes No

Date available for work _____ What is your desired salary range?..... \$ _____

Type of employment desired Full-Time Part-Time Temporary Seasonal

Are you able to meet the attendance requirements for the position? Yes No

Drivers license number if driving is an essential job function: # _____ State _____

Have you ever pled "guilty" or "no contest" to, or been convicted of a crime? Yes No

If yes, please provide dates(s) and details: _____

ANSWERING "YES" TO THESE QUESTIONS DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT. FACTORS SUCH AS DATE OF THE OFFENSE, SERIOUSNESS, NATURE OF THE VIOLATION, REHABILITATION AND POSITION APPLIED FOR WILL BE TAKEN INTO ACCOUNT.

Employment History (list most recent job first)

From:		To:		Employer:		Telephone # With A/C:	
Starting Job Title/Final Job Title:				Address:			
Immediate Supervisor and Title:				Nature of Work:		Duties:	
May We Contact for References?				Your Name if Different from Present:			
Reason for Leaving:				Hourly Rate/Salary:		Start \$ _____ Per _____ Final \$ _____ Per _____	
From:		To:		Employer:		Telephone # With A/C:	
Starting Job Title/Final Job Title:				Address:			
Immediate Supervisor and Title:				Nature of Work:		Duties:	
May We Contact for References?				Your Name if Different from Present:			
Reason for Leaving:				Hourly Rate/Salary:		Start \$ _____ Per _____ Final \$ _____ Per _____	
From:		To:		Employer:		Telephone # With A/C:	
Starting Job Title/Final Job Title:				Address:			
Immediate Supervisor and Title:				Nature of Work:		Duties:	
May We Contact for References?				Your Name if Different from Present:			
Reason for Leaving:				Hourly Rate/Salary:		Start \$ _____ Per _____ Final \$ _____ Per _____	
From:		To:		Employer:		Telephone # With A/C:	
Starting Job Title/Final Job Title:				Address:			
Immediate Supervisor and Title:				Nature of Work:		Duties:	
May We Contact for References?				Your Name if Different from Present:			
Reason for Leaving:				Hourly Rate/Salary:		Start \$ _____ Per _____ Final \$ _____ Per _____	

Job Referral

Were you referred for employment by an Alco employee? Yes No

Referred by:

Employee's Name

Employee's Work Location

Skills and Qualifications

Summarize any training, licenses, and/or certificates that may qualify you for the position for which you are applying.

Education

a. Highest grade completed. 1 2 3 4 5 6 7 8 9 10 11 12

b. If you did not complete high school, do you have a high school equivalency diploma? Yes No

c. Number of years of post high school education. 1 2 3 4 5 6 7

Name and Location	Hours	Degree Received	Major or Specialty	Minor	Dates Attended
1					
2					
3					

d. If you expect to complete an education program in the near future, please indicate what type of degree or program and expected completion date:

Business References

Name	Telephone	Number of Years Known

Professional, Trade, or Business Activities

List professional, trade, business, or civic activities and offices held. *You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability, or other protected status.*

APPLICANT STATEMENT AND AUTHORIZATION

I certify that all information I have provided in order to apply for and secure work with ALCO is true, complete, and correct.

I understand that any information provided by me that is found to be false, incomplete, or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from ALCO's service, whenever it is discovered.

I expressly authorize, without reservation, ALCO, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities, and educational institutions and to otherwise verify the accuracy of all information provided by me in the application, resume, or job interview. I also authorize ALCO to make a criminal record investigation to determine if I have been convicted of any criminal activity in this or other states. I hereby waive any and all rights and claims I may have regarding ALCO, its agents, employees, or representatives, for seeking, gathering, and using such information in the employment process and all other persons, corporations, or organizations for furnishing such information about me.

I understand that ALCO is an equal opportunity employment company and affords equal employment opportunity to each qualified person without regard to race, color, religion, sex, sexual orientation, familial status, age, handicap, national origin, or citizenship. I further understand that ALCO does not unlawfully discriminate in employment and no question on this application is to be used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable, local, state, or federal law.

I understand that, if employed, I must serve a 90-day orientation period and must abide by ALCO's rules and policies.

If I am hired, I understand that I am free to resign at any time, with or without cause, and ALCO reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of ALCO is authorized to make any assurances to the contrary and that no implied, oral, or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by ALCO's President.

I understand that ALCO reserves the right to investigate all matters involving its business and that, if employed, I must cooperate and assist in such investigations, including submitting to investigative searches and tests of whatever nature, and that failure to do so shall result in disciplinary action, including possible discharge. I understand that ALCO maintains a drug free workplace, and has a drug policy that allows the company to test employees for the presence of drugs and alcohol, under certain circumstances. I further understand that a pre-employment drug test will be required and if these test results are positive for alcohol, illegal drugs, controlled substances, or prescription drugs which have not been prescribed for use by me. I will not be given further consideration for employment.

I understand that this application is current for only 30 days and that, if I have not heard from ALCO within 30 days and still wish to be considered for employment, I must complete a new application.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I agree that in the event my employment with ALCO ends, and I fail to return property or funds of the firm entrusted in me, ALCO may deduct the value of these items, and any other outstanding items, from my final compensation.

I understand if I leave the employ of ALCO, my signature on the Applicant Statement Authorization authorizes ALCO to release information regarding my performance, previous schools, employers, residence address, and references, which may be used in determining my employment eligibility with a new employer.

DO NOT SIGN UNTIL YOU HAVE READ THE COMPLETE APPLICANT STATEMENT AND AUTHORIZATION.

I certify that I have read, fully understand, and accept all terms of the foregoing Applicant Statement and Authorization.

Signature of Applicant: _____

Date _____ / _____ / _____

CREDIT REPORT DISCLOSURE

I understand that a consumer report or an investigative consumer report may be requested from a consumer reporting agency whereby information is obtained through personal interviews with my neighbors, friends, associates, acquaintances, or others who may have knowledge of my character, general reputation, personal characteristics, and mode of living and I hereby authorize the procurement of any such report. I understand that ALCO applies the same credit standards to individuals making application for employment that it does to individuals making an application for tenancy in its apartment communities. I further understand that this information will be used for employment purposes only. I understand that, upon my request, I have the right to know if any such report is requested and, if so, the name and address of the consumer reporting agency that furnished such a report and, in the case of a consumer investigative report, that I may inspect and receive a copy of such report by contacting such agency. I also understand that I have the right to receive a complete and accurate disclosure of the nature and scope of the information requested if I request such disclosure within a reasonable time.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE STATEMENT.

I certify that I have read, fully understand, and accept all terms of the foregoing Credit Report Disclosure.

Signature of Applicant: _____

Date _____ / _____ / _____

Applicant: Do not write on this page.

For interviewer's use only.

Interview Results

Interviewer	Date	Comments

Test Results

Tests Administered	Date	Score	Rating	Comments and Interpretation

Reference Check

Results of Reference Check	
Employer 1	
Employer 2	
Employer 3	

Applicants Not Hired

List the reason this applicant was not hired.
