



## EMPLOYMENT APPLICATION

### PERSONAL INFORMATION

Date: _____	Desired position:
Last Name:	First Name:
Middle Name:	Other names used (maiden name, nickname, etc.):
Email Address:	Home phone #
Address (street):	Cell phone #:
City, State, Zip Code	Referred by (if applicable):
Have you interviewed with FCS INC? <input type="checkbox"/> Yes <input type="checkbox"/> No	(List dates & locations if applicable).
Have you been worked for FCS INC? <input type="checkbox"/> Yes <input type="checkbox"/> No	(List dates, job titles, & locations if applicable).
Do you have relatives who work for FCS INC? <input type="checkbox"/> Yes <input type="checkbox"/> No	(List dates, job titles, & locations if applicable).

Are you at least 18 years old?  Yes  No

If you are under 18, do you have a valid work permit?  Yes  No

FT       PT Hours Wanted \_\_\_\_\_       OCC Hours Wanted \_\_\_\_\_

**\*\*\*\*Please check all your availability to work\*\*\*\***

- 7am-4pm hours are limited.

Hours	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
7am-4pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3pm-11p	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10p-9am	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: \_\_\_\_\_  
 \_\_\_\_\_

# EDUCATION

Please complete the following table with the appropriate information.

School	Address	Major studies	Degree, diploma, license or certificate*
High school			
College/university			
Vocational, business, or other			

\* Please indicate number of years completed if a degree, diploma, license or certificate was not earned.

Please list any professional designations here.

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Please list other special knowledge, skills or qualifications here.

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Check if you have experience with:

Word   
  Excel   
  Copiers   
  Fax   
  EDoc

Check your Proficiency with Computers: (typing, mouse, web navigation, etc.)

1   
  2   
  3   
  4   
  5

# EMPLOYMENT HISTORY

List all employments for the past 10 years, starting with the most recent position. All information **must** be completed. You may attach a resume, but please also complete the following table accordingly.

Employed from:	Name of Employer:	Name of Supervisor:	Starting salary:
Employed until:	Employer's Address:	Supervisor's Phone:	Ending salary:
Job Title:		Reason(s) for leaving:	
Duties and responsibilities:			

Employed from:	Name of Employer:	Name of Supervisor:	Starting salary:
Employed until:	Employer's Address:	Supervisor's Phone:	Ending salary:
Job Title:		Reason(s) for leaving:	
Duties and responsibilities:			

Employed from:	Name of Employer:	Name of Supervisor:	Starting salary:
Employed until:	Employer's Address:	Supervisor's Phone:	Ending salary:
Job Title:		Reason(s) for leaving:	
Duties and responsibilities:			

## ADDITIONAL INFORMATION

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Please clearly mark either "yes" or "no" for each question.

Yes    No

- May we contact your current employer for references?
- If you are hired, will you be able to work overtime?
- Will you be able to perform the essential job functions for the position you are applying for with or without reasonable accommodation?
- Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by the court? (a "yes" response does not automatically disqualify your application)
- Do you have a record of founded child or dependent adult abuse in this state or any other? (a "yes" response does not automatically disqualify your application)

# CERTIFICATION & AUTHORIZATION

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Please read the following information carefully. Then sign and date as indicated.

The above information is true and correct. I understand that, in the event of my employment by the FULL CIRCLE SERVICES INC., I shall be subject to dismissal if any information that I have given in this application is false or misleading or if I have failed to give any information herein requested, regardless of the time elapsed after discovery.

I authorize FULL CIRCLE SERVICES INC. to inquire into my educational, professional and past employment history references as needed to research my qualifications for this position. I hereby give my consent to any former employer to provide employment-related information about me to FULL CIRCLE SERVICES INC. and will hold FULL CIRCLE SERVICES INC. and my former employer harmless from any claim made on the basis that such information about me was provided or that any employment decision was made on the basis of such information.

I understand that nothing in this employment application, the granting of an interview or my subsequent employment with FULL CIRCLE SERVICES INC. is intended to create an employment contract between myself and the Company under which my employment could be terminated only for cause. On the contrary I understand and agree that, if I am hired, my employment will be terminable at will and may be terminated by me or FULL CIRCLE SERVICES INC. at any time and for any reason. I understand that no person has any authority to enter into any agreement contrary to the foregoing.

If employed, I will be required to provide original documents which verify my identity and right to work in the United States under the Immigration Reform and Control Act (IRCA) of 1986. The document(s) provided will be used for completion of Form I-9.

I hereby acknowledge that I have read and agree to the above statements.

Signature \_\_\_\_\_ Date \_\_\_\_\_

FULL CIRCLE SERVICES INC. is an equal opportunity employer.  
All qualified Applicants will be considered without regard to age, race,  
Color, sex, religion, nation origin, marital status, ancestry, citizenship, veteran status, sexual orientation or preference, or  
physical or mental disability.