



EMPLOYMENT APPLICATION

Barry E. Walter Sr. Company is an Equal Opportunity Employer dedicated to a policy of non-discrimination in employment practices. All applicants will receive consideration for employment without regard to gender, sexual orientation, age, race, color, religion, marital status, physical handicap, national origin, or other legally-protected status. Barry E. Walter Sr. Company supports a drug-free workplace.

Please print all information carefully and completely.

ABOUT YOU

Name (Last, First, Middle): _____ Home Phone: (____) _____
 Address (Number and Street): _____ Work Phone: (____) _____
 City, State, Zip Code: _____ How long have you lived there: _____

Last Previous Address: _____

How long did you live there? _____

For the purpose of verifying education and prior work history, have you ever used another name?

Yes, Name: _____ No

If hired, can you furnish proof that you are over 18 years of age? Yes No

If hired, can you present evidence of your legal right to work in the United States? Yes No

(The Immigration Reform & Control Act of 1986 requires you to furnish proof of your employment authorization and your identity before you can begin work.)

Have you ever been convicted of a felony? Yes No If yes, please give the date(s) and details: _____

Have you been arrested for any matters for which you are out on bail or on your own recognizance pending trial? Yes No
 If yes, please give the date(s) and details: _____

(Answering "yes" to these questions does not constitute an automatic bar to employment. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account. **Do not include** minor traffic infractions, and convictions for which the record has been sealed or expunged, any conviction for which probation has been successfully completed or otherwise discharged and the case has been judicially dismissed, referrals to and participation in any pretrial or post trial diversion programs, and misdemeanor convictions for marijuana-related offenses that occurred over two years ago in answering these questions.)

Have you ever worked for this employer before? Yes No If yes, when and where: _____

Do you have any relatives, including spouse, working for this employer? Yes No If yes, who and where: _____

POSITION DESIRED

Position desired: _____ Salary desired: _____

Full Time Part Time Date available to start work: _____

Are you able to satisfactorily perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? Yes No Note: Please ask the interviewer if you are uncertain as to the essential functions of this position.

Do you have reliable transportation to and from work? Yes No Can you work overtime? Yes No

How were you referred to us? Newspaper: _____ Agency: _____ Employee: _____

Employer reputation Other: _____

EDUCATION

	School & Address	Course of Study	Years Completed (circle highest)	Did you graduate?	Degree Received
High School			XXXXXXXXXXXX XXXXXXXXXXXX	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Still Attending	
College			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Still Attending	
Graduate School			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Still Attending	
Technical or Trade School			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Still Attending	
Other			1 2 3 4	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Still Attending	

PROFESSIONAL ORGANIZATIONS

(You may exclude organizations that indicate race, color, religion, national origin, disability or other protected status.)

List any *job-related* professional organizations of which you are a member:

SKILLS & OTHER EXPERIENCE

Have you ever used a computer? _____ With what computer software do you have experience?

What other types of office equipment can you operate? _____

What other types of machinery/equipment can you operate? _____

Are there any other experiences, skills or qualifications that you feel would especially qualify you for the position you are applying for? _____

BUSINESS REFERENCES

Please list previous employers who are familiar with your work and abilities.

NAME	TITLE COMPANY	COMPANY ADDRESS (Street, City and State)	DAYTIME TELEPHONE NUMBER	BUSINESS RELATIONSHIP	NUMBER OF YEARS KNOWN

PERSONAL REFERENCES

Please list persons who know you well – not previous employers or relatives.

NAME	OCCUPATION	ADDRESS (Street, City and State)	TELEPHONE NUMBER	HOW KNOWN	HOW LONG KNOWN

EMPLOYMENT HISTORY

Please indicate your employment history, starting with your most recent employment. Be sure to account for **all** periods of time including military service and any period of unemployment. Attach additional pages if necessary.

THIS SECTION MUST BE FULLY COMPLETED EVEN IF A RESUME IS ATTACHED.

DATES EMPLOYED	EMPLOYERS	SALARY
From: ___ ___ Mo. Year	Company: _____ Street Address: _____	Start: _____ End: _____
To: ___ ___ Mo. Year	City/State/Zip: _____ Supervisor Name and Title: _____	Phone: (____) _____
	Reason for leaving: _____	
	Position Title and Job Duties: _____ _____ _____	
	If still employed, may we contact present employer: ___ Yes ___ No If no, please explain: _____ _____	

From: ___ ___ Mo. Year	Company: _____ Street Address: _____	Start: _____ End: _____
To: ___ ___ Mo. Year	City/State/Zip: _____ Supervisor Name and Title: _____	Phone: (____) _____
	Reason for leaving: _____	
	Position Title and Job Duties: _____ _____ _____	

From: ___ ___ Mo. Year	Company: _____ Street Address: _____	Start: _____ End: _____
To: ___ ___ Mo. Year	City/State/Zip: _____ Supervisor Name and Title: _____	Phone: (____) _____
	Reason for leaving: _____	
	Position Title and Job Duties: _____ _____ _____	

From: ___ ___ Mo. Year	Company: _____ Street Address: _____	Start: _____ End: _____
To: ___ ___ Mo. Year	City/State/Zip: _____ Supervisor Name and Title: _____	Phone: (____) _____
	Reason for leaving: _____	
	Position Title and Job Duties: _____ _____ _____	

Have you ever been terminated or asked to resign from any job? ___ Yes ___ No If yes, please explain the circumstances: _____

Please explain any gaps in your employment history: _____

APPLICANT STATEMENT & ACKNOWLEDGMENT

Please read this section carefully. It affects your legal rights. Please ask any questions *before* you sign.

In exchange for the consideration of this employment application by Barry E. Walter Sr. Company:

1. I hereby state that all the information that I provided on this application or any other documents filled out in connection with my employment, and in any interview, is true and correct. I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand that if I am employed and any such information is later found to be false or incomplete in any respect, whenever or however discovered, I may be terminated from employment..
2. I understand that Barry E. Walter Sr. Company, when considering my application for employment, when making a decision whether to offer me employment, when deciding whether to continue my employment (if I am hired), and when making other employment-related decisions directly affecting me, may wish to obtain and use a “consumer report” or “investigative consumer report” from a “consumer reporting agency.” A notice and authorization to obtain such a report, together with a definition of terms and a description of my rights in connection with such reports is being provided to me as a separate document for my signature.
3. I further understand that in connection with my application for employment, Barry E. Walter Sr. Company may contact my previous employers, and I authorize those employers to disclose to Barry E. Walter Sr. Company all records and information pertinent to my employment with them. In addition to authorizing the release of any information regarding my employment, I hereby fully waive any rights or claims I have or may have against my former employers, their agents, employees, and representatives, as well as other individuals who release information to Barry E. Walter Sr. Company, and release them from any and all liability, claims, or damages that my directly or indirectly result from the use, disclosure, or release of any such information by any person or party, whether such information is favorable or unfavorable to me. I authorize the persons named herein as personal and/or business references to provide Barry E. Walter Sr. Company with any pertinent information they may have regarding myself.
4. In the event I become employed by Barry E. Walter Sr. Company, I agree to comply with all rules and regulations of Barry E. Walter Sr. Company. I understand that Barry E. Walter Sr. Company reserves the right to require me to submit to a test for the presence of drugs in my system prior to employment, to the extent permitted by law. I also understand that any offer of employment may be contingent upon the passing of a physical examination. I consent to the disclosure of the results of any physical examinations and related tests to Barry E. Walter Sr. Company. I also understand that I may be required to take other job-related tests prior to employment and during my employment. I understand that should I decline to sign this consent or decline to take any of the above tests, my application for employment may be rejected or my employment may be terminated.
5. If hired, I agree as follows: My employment and compensation is terminable at-will, is for no definite period, and my employment and compensation may be terminated by Barry E. Walter Sr. Company (employer) at any time and for any reason whatsoever, with or without good cause at the option of either Barry E. Walter Sr. Company or myself. No implied, oral, or written agreement contrary to the express language of the foregoing sentence is valid unless it (a) is set forth in a writing signed both by the President of Barry E. Walter Sr. Company and me, and (b) expressly states an intention to amend the terms of the preceding sentence of this Acknowledgment. No supervisor or representative of Barry E. Walter Sr. Company other than the President of Barry E. Walter Sr. Company has any authority to make any agreement contrary to the foregoing. This agreement is the entire agreement between Barry E. Walter Sr. Company and the employee regarding the rights of Barry E. Walter Sr. Company or employee to terminate employment with or without good cause, and this agreement takes the place of all prior and contemporaneous agreements, representations, and understandings of the employee and Barry E. Walter Sr. Company.
6. I understand and agree that I am obligated to return, in its original condition, any and all Company property of any sort within my possession or control upon any demand by Barry E. Walter Sr. Company. If I fail to do so upon demand, the fair market value of same may be withheld from me, and I specifically hereby authorize Barry E. Walter Sr. Company to withhold said fair market value from any compensation due me, to the extent consistent with all applicable laws.

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

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE STATEMENT & AGREEMENT

Date

Applicant Signature