



APPLICATION FOR EMPLOYMENT

Thank you for your interest in our organization. The Service Fort is an equal opportunity employer and will consider all applicants without regard to race, color, age, gender, disability, national origin or ancestry, sex, sexual orientation, gender identity, gender expression, genetic information, religion, veteran or military status, citizenship, or any other class protected under Federal, State or Local Law. The information collected by this application is solely to determine suitability for employment, verify identity, and maintain employment statistics on applicants.

Please complete pages 1-6; page 7 is optional.

Date

Name

Last

First

Middle

Maiden

Present Address

Number/Street

City

State

Zip

Home Phone

Cell Phone

Email

Are you at least 18 years or older? No Yes

(If no, you may be required to provide authorization to work.)

Days/hours available to work

Position applied for (1) _____

and salary desired (2) _____

No Preference

Thursday

Monday

Friday

Tuesday

Saturday

Wednesday

Sunday

Shift Preference?

Can you work overtime if required? No Yes

Can you travel if required? No Yes

Employment desired: FULL-TIME PART-TIME TEMPORARY (Internship)

Referral Source Advertisement _____ Employee Referral _____

Employment Agency _____ Walk-in _____

Other _____

When are you available for work?

TYPE OF SCHOOL (High School, College, Business or Trade School, etc.)	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE OBTAINED

Are you legally eligible for employment in the United States?

No Yes

(Note: If offered employment, in compliance with federal law, you will be required to verify identity and eligibility to work in the United States, to complete appropriate employment eligibility verification documents (e.g., USCIS Form I-9), and participate in applicable e-Verify procedures.)

Is there any other name (e.g., maiden name, prior name, nickname, etc.) under which your employment or school records would be listed?

Do you have a friend or relative who works at the Service Fort? If yes, please provide name(s), relationship(s), and work location(s):

Have you ever applied for a job position at The Service Fort in the past? If yes, when and what job?

Have you have been disciplined by an employer for engaging in an act of violence or other threatening or unsafe conduct in the workplace? If so, please provide details.

Are you subject to any agreement with a former employer that contains restrictive covenants (non-competition, non-solicitation, non-recruitment, nondisclosure of confidential information) that may restrict or limit your ability to work for The Service Fort.? If yes, please explain, and provide a copy of the agreement.

Are you able to perform the essential job functions of the job you are applying for, with or without reasonable accommodation?
 No Yes If no, describe the functions that cannot be performed.

(Note: The Service Fort complies with the ADA and will consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential job functions. It is possible that, if you are offered a position, you may be tested on skill/agility and may be subject to a medical examination conducted by a medical professional.)

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Please list three references, other than relatives, whom we may contact about you.

Name	
Position	
Company	
Address	
Telephone	
<hr/>	
Name	
Position	
Company	
Address	
Telephone	
<hr/>	
Name	
Position	
Company	
Address	
Telephone	

Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying. Please describe any past responsibilities or achievements that may qualify you for a position at The Service Fort.

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Work Experience

Please list your work experience (including any military experience) beginning with your most recently held job. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer		Name of last supervisor	Employment dates	Pay or salary
Address				
City, State, Zip Code				
Phone number				
	Your last job title		From	Start
			To	Final

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Name of employer		Name of last supervisor	Employment dates	Pay or salary
Address				
City, State, Zip Code				
Phone number				
	Your last job title		From	Start
			To	Final

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Name of employer		Name of last supervisor	Employment dates	Pay or salary
Address				
City, State, Zip Code				
Phone number				
	Your last job title		From	Start
			To	Final

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

Please explain any gaps in employment exceeding 30 days.

May we contact your present employer? No Yes

Did you complete this application yourself? No Yes

If not, list name of person completing the application: _____

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CERTIFICATION - PLEASE READ CAREFULLY BEFORE SIGNING

If you are hired, this application will become a part of your official employment record.

By signing below, and in exchange for the consideration of my job application by The Service Fort (hereinafter called "The Service Fort"), I understand and agree that,

- Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment with The Service Fort, or to confer any right to remain an employee of The Service Fort, or otherwise to change in any respect the employment-at-will relationship between the Company and the undersigned. I further understand that the employment-at-will relationship means that both the undersigned and The Service Fort may end the employment relationship at any time without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise its benefits, policies and procedures, and those such changes may include reduction in benefits. The nature of this employment-at-will relationship cannot be altered except by a written instrument signed by the CEO and/or Vice President of Human Resources.
- I certify that the information provided by me in this application is true, accurate, and complete. I certify that I have not knowingly omitted any information that might adversely affect my chances of employment with The Service Fort. I understand that, if I am hired, this application will become a part of my official employment record. I understand that any misrepresentation or omission of facts in this application may result in my dismissal at any time without any previous notice.
- The Service Fort has my permission to contact schools, previous employers (unless otherwise indicated by me), references, and others I have listed on this application in order to verify the accuracy of the information contained in this application. I authorize employers, schools and other persons named on this application to provide any information or transcripts requested. I hereby release the Company from any liability as a result of such contact.
- I understand, where permissible under applicable state and local law, I may be subject to a pre-employment background check after receiving a conditional offer of employment to investigate my criminal background, driving record, credit history, and/or other matters related to my suitability for employment. I understand that a separate disclosure and consent form will be provided to me prior to any background check.
- I understand, where permissible under applicable state and local law, I may be subject to a pre-employment drug test after receiving a conditional offer of employment, and must receive a negative result for illegal drug use before being permitted to commence work with the Company.
- I understand, where permissible under applicable state and local law, I may be subject to a pre-employment medical examination after receiving a conditional offer of employment, and must meet the qualifications for the position, with or without reasonable accommodation, before being permitted to commence work with the Company.
- I hereby certify that, if employed, my employment with The Service Fort will not conflict with, or result in the violation of, any contract, agreement or understanding that I am a party to or am bound by, other than those I have disclosed in this application, if any.

Signature of Applicant

Date

The Service Fort is an equal opportunity employer and will consider all applicants without regard to race, color, age, gender, disability, national origin or ancestry, sex, sexual orientation, gender identity, gender expression, religion, veteran or military status, citizenship, or any other class protected under Federal, State or Local Law.

Please return completed forms to:

The Service Fort
Attn: Human Resources
4153 Roswell Rd
Atlanta, GA 30342

Voluntary Applicant Data Record

Non-Discrimination Policy: The Service Fort is an equal opportunity employer and will consider all applicants without regard to race, color, age, gender, disability, national origin or ancestry, sex, sexual orientation, gender identity, gender expression, religion, veteran or military status, citizenship, or any other class protected under Federal, State, or Local Law.

Solely to help us comply with government record keeping, reporting, and other legal requirements, please fill out the Applicant Data Record. We appreciate your cooperation.

This data is for periodic government reporting and will be kept in a **Confidential File** separate from the Application for Employment.

Date (00/00/0000):

Title of position you are applying for:

Gender: Male Female

Birth Date (00/00/0000):

Referral Source (select one):

- Advertisement _____
- Employee Referral _____
- Employment Agency _____
- Walk-in _____
- Other _____

Ethnic Category (select one):

- White
- Black / African American
- Hispanic or Latino
- American Indian/Alaskan Native
- Asian / Pacific Islander
- Other _____

Military Status (select one):

- Disabled
- Vietnam Era Veteran
- Disabled Veteran

Signature: _____ **Date:** _____