



Keidser Services, Inc.

Employment Application

Applicant Information

Full Name: _____ Date _____
Last First M.I.
Address: _____
Street Address Apartment/Unit #
City State ZIP Code
Phone _____ E-mail Address: _____
Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____
Position Applied for: _____

Are you a citizen of the United States? YES ☐ NO ☐ If no, are you authorized to work in the U.S.? YES ☐ NO ☐
Have you ever worked for this company? YES ☐ NO ☐ If so, when? _____
Have you ever been convicted of a felony? YES ☐ NO ☐
If yes, explain: _____

Education

High School: _____ Address _____
From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____
College: _____ Address _____
From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____
Other: _____ Address _____
From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship _____
Company _____
Address _____ Phone: () _____
Full Name: _____ Relationship _____
Company _____
Address _____ Phone: () _____
Full Name: _____ Relationship _____
Company _____
Address _____ Phone: () _____

Address _____

Previous Employment

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: () _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

Keidser Services, Inc.

Disclosure and Authorization Form

As part of the application process for employment at Keidser Services, Inc., I understand that Keidser Services, Inc. will seek and obtain investigative reports about me as defined in the Fair Credit Reporting Act(FCRA). These investigative reports may include, but is not limited to names and dates of previous/current employment, work experience, work habits, characters, work performance, general reputation, workers compensation claims, criminal history records (from local, state, federal, international and other law enforcement agencies' records), sexual offender's lists, wants and warrants records, motor vehicle records, military records, educational verification, license verification, credit history\ civil case, OIG/GSA, OFAC/patriots act, any sanction lists, FBI finger printing and drug testing. I understand that these records may be used for the eligibility and qualification of my employment. I hereby authorize, without any reservation, the full release of these records and information for Keidser Services, Inc. and/or its agents to conduct the searches and investigations.

If I am hired, I also authorize the full release of the information described above, without any reservation, throughout any duration of my employment at Keidser Services, Inc.. I also certify that all information provided below and on my resume is correct to the best of my knowledge. Any false statements provided in this form and my resume will be considered just cause for the termination of employment at any time. I agree that a copy or facsimile of this authorization shall be as valid as the original. In addition, I release and discharge Keidser Services, Inc., and all of its agents, any expenses, losses, damages, and liabilities for the investigative process.

Applicant's Name: _____
(Please Print) First M.I. Last

Previous or Maiden Name (If applicable) _____
(Please Print) First M.I. Last

Signature: _____ **Date:** ____mm/____dd/____yy

Date of Birth: ____mm/____dd/____yy (this is used for criminal and driving records only)

Social Security Number: _____ - _____ - _____ **Female** ☐ **Male** ☐

Driver's License Number: _____ **State:** _____

Current Address: _____

Street Address

City State ZIP

Length of Residency: _____ **Email address:** _____ **Phone:** (____) _____