

Date: _____

APPLICATION FOR EMPLOYMENT

Please Answer All Questions. Resumes Are Not A Substitute For A Completed Application

Schlenner Wenner & Co is an equal opportunity employer. Applicants are considered for positions without regard to veteran status, uniformed service member status, race, color, religion, sex, national origin, age, physical or mental disability, genetic information or any other category protected by applicable federal, state, or local laws.

Position Applied For _____ Full Name: _____
(list only one) Last First M.I.

Telephone Number: _____ Alternate/Cellular Telephone Number: _____

Current Address: _____
Street Address Apartment/Unit #

City State ZIP Code

How long have you lived there _____ Years/Months Email Address: _____

Desired Salary/Hourly Rate _____

Type of employment desired? Full-time ☐ Part-time ☐ (Specify Hours) _____

Are you willing to work overtime? Yes ☐ No ☐ Date on which you can start work if hired _____

Have you previously applied for employment with this Company? Yes ☐ No ☐

If Yes, when and for what position did you apply? _____

Have you ever been employed by this Company? Yes ☐ No ☐

If Yes, provide dates of employment, location, and reason for separation from employment. _____

If applicable, below list any other names by which you have been known which may be necessary to allow us to confirm your work and educational record. For example, change of name, use of assumed name, nickname, etc.

Education	School Name and Location (Address, City, State)	Course of Study	Graduate? Y or N	# Years Completed	Degree/Major
High School					
College					
Bus./Tech./Trade or Post College					

Honors Received _____

WORK EXPERIENCE

Please list the names of your present and/or previous employers in chronological order with present or most recent employer listed first. Provide information for at least the most recent ten (10) year period. Attach additional sheets if needed. If self-employed, supply firm name and business references. You may include any verifiable work performed on a volunteer basis, internships, or military service. Your failure to completely respond to each inquiry may disqualify you for consideration from employment. Do not answer "see resume."

Employer Name *Address* *Type of Business*

Telephone Number: _____ Dates Employed From ____/____/____ to ____/____/____

Job Title _____ Duties _____

Supervisor's Name _____ May we contact? Yes ☐ No ☐ If No, why not? _____

Reason for Leaving? _____

What will this employer say was the reason your employment terminated? _____

How much notice did you give when resigning? If none, explain. _____

Employer Name *Address* *Type of Business*

Telephone Number: _____ Dates Employed From ____/____/____ to ____/____/____

Job Title _____ Duties _____

Supervisor's Name _____ May we contact? Yes ☐ No ☐ If No, why not? _____

Reason for Leaving? _____

What will this employer say was the reason your employment terminated? _____

How much notice did you give when resigning? If none, explain. _____

Have you ever been terminated or asked to resign from any job? Yes ☐ No ☐ If Yes, how many times? _____

Has your employment ever been terminated by mutual agreement? Yes ☐ No ☐ If Yes, how many times? _____

Have you ever been given the choice to resign rather than be terminated? Yes ☐ No ☐ If Yes, how many times? _____

If you answered Yes to any of the above three questions, please explain the circumstances of each occasion.

REFERENCES

Please list the names of additional work-related references we may contact. Individuals with no prior work experience may list school or volunteer-related references.

NAME	POSITION	COMPANY	WORK RELATIONSHIP (i.e., supervisor, co-worker)	TELEPHONE

Please list the names of personal references (not previous employers or relatives) who know you well that we may contact.

NAME	OCCUPATION	ADDRESS	TELEPHONE	NUMBER OF YEARS KNOWN

APPLICANT CERTIFICATION

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license for the state in which I reside and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

I understand that Schlenner Wenner & Co may now have, or may establish, a drug-free workplace or drug and/or alcohol testing program consistent with applicable federal, state, and local law. If Schlenner Wenner & Co has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state and local law. I also understand that all employees of the location, pursuant to Schlenner Wenner & Co's policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or illegal or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and drug testing consistent with Schlenner Wenner & Co's policies and applicable federal, state, and local law.

If employed by Schlenner Wenner & Co, I understand and agree that Schlenner Wenner & Co, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, and computers) and, in certain circumstance, my personal property.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign a confidentiality, restrictive covenant, and/or conflict of interest statement.

I certify that all the information on this application, my resume, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

I UNDERSTAND THAT SCHLENNER WENNER & CO IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, SCHLENNER WENNER & CO OR I MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE. NOTHING IN THIS APPLICATION OR IN ANY DOCUMENT OR STATEMENT, WRITTEN OR ORAL, SHALL LIMIT THE RIGHT TO TERMINATE EMPLOYMENT AT-WILL. NO OFFICER, EMPLOYEE OR REPRESENTATIVE OF SCHLENNER WENNER & CO IS AUTHORIZED TO ENTER INTO AN AGREEMENT – EXPRESS OR IMPLIED – WITH ME OR ANY APPLICANT FOR EMPLOYMENT FOR A SPECIFIED PERIOD OF TIME UNLESS SUCH AN AGREEMENT IS IN A WRITTEN CONTRACT SIGNED BY THE MANAGING PARTNER OF SCHLENNER WENNER & CO.

IF HIRED, I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF SCHLENNER WENNER & CO, AND I UNDERSTAND THAT SCHLENNER WENNER & CO HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL.

I authorize Schlenner Wenner & Co or its agents to confirm all statements contained in this application and/or resume as it relates to the position I am seeking to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation which may be permitted by federal, state and/or local law. If applicable and allowed by law, I will receive separate written notification regarding Schlenner Wenner & Co's intent to obtain "consumer reports."

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above mentioned information. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to Schlenner Wenner & Co or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability Schlenner Wenner & Co and it's representative for seeking such information and all other persons, corporations, or organization furnishing such information. Further, If hired, I authorize Schlenner Wenner & Co to provide truthful information concerning my employment to future employers and hold Schlenner Wenner & Co harmless for providing such information.

If hired by Schlenner Wenner & Co, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by Schlenner Wenner & Co. I also understand Schlenner Wenner & Co employs only individuals who are legally eligible to work in the United States.

THIS APPLICATION WILL BE CONSIDERED ACTIVE FOR A MAXIMUM OF SIXTY (60) DAYS. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY.

I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE, ACCURATE, AND COMPLETE.

DO NOT SIGN UNTIL YOU HAVE READ ALL OF THE INFORMATION CONTAINED IN THE APPLICATION.

Applicant Signature _____ Date ____/____/____
