

### EEO/AA Employer/Vet/Disabled

# **Application for Employment**

Baskerville-Donovan, Inc. is an affirmative action/equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, religion, color, national origin, sex, age, status as a protected veteran, or status as a qualified individual with a disability.

### PLEASE ANSWER ALL QUESTIONS-RESUME CANNOT BE SUBSTITUTED

GENERAL INFORMATION							
Full Name (Last, First, Middle):	Preferred Name	Preferred Name:					
Home Address (No., Street, Apt. No.):		City:	State:	Zip Code:	County:		
Mailing Address (No., Street, Apt. No.):		City:	State:	Zip Code:	County:		
Home Phone: Alterna		ate number (working hours):		Are you at least 18 years old?			
			yes no				
Referral Source - How did you become aware of an employment opportunity with Baskerville-Donovan, Inc.?							
Advertisement Employee Referral Walk in Recruiting Agency Client referral							
College recruiting Job Fair		State Employment Agency		BDI internet job posting			
Other:							
Have you ever applied with or been employed at Baskerville-Donovan, Inc.?							
If yes, list date applied or employment dates:							
Job you are applying for:							

EDUCATION							
School	<u>Course of Study</u> Completion Date	Grade Ave./ Scale	School Name	City and State			
Technical/ Trade School							
College							
College							
Graduate School							
Other							

**Employment/ Military Service History** Please provide your employment history below. Please indicate if your name was different than your current name for any employment listed.

Dates	Name (if different than current):
From: To:	
Employer	Job Title:
	Job Tite.
Employer Address (No, Street, City, State)	Salary: S
	Is this salary annual hourly
Supervisor's Name, Title and Phone Number:	Reason for leaving:
Dates	Name (if different than current):
From: To:	
Employer	Job Title:
Employer Address (No, Street, City, State)	Salary: S
	Is this salary annual hourly
Supervisor's Name, Title and Phone Number:	Reason for leaving:
Dates	Name (if different than current):
From: To:	
Produce	Job Title:
Employer	Job 1102:
Employer Address (No, Street, City, State)	Salary: S
	Is this salary annual hourly
Supervisor's Name, Title and Phone Number:	Reason for leaving:
Dates	Name (if different than current):
From: To:	
Employer	Job Title:
Employer Address (No, Street, City, State)	Salary: S
Supervisor's Name, Title and Phone Number:	Is this salary annual hourly Reason for leaving:
Supervisor s Name, The and Filone Number.	Reason for leaving.
Dates From: To:	Name (if different than current):
10. IV.	
Employer	Job Title:
Employer Address (No, Street, City, State)	Salary: S
	Is this salary annual hourly
Supervisor's Name, Title and Phone Number:	Is this salary annual hourly Reason for leaving:

## **Criminal Convictions**

NOTE: Criminal convictions do not automatically disqualify an individual from employment. Circumstances surrounding a conviction including the nature of the offense, the time of the offense, and evidence of rehabilitation since the offense, will be reviewed and taken into account, in light of the position for which you are being considered.

Have you ever been convicted of and/or fined for the commission of a criminal offense (misdemeanor or felony)?

Have you ever been convicted of any moving traffic violation (speeding, running a red light, etc.)?

If the answer to any of the items above is yes, please explain all occurrences in detail and complete the information in the chart below. If necessary, attach additional sheets:

Name (at time of conviction or fine)	Date	Charge	Law Agency	Disposition

I understand that the above information will be verified by Baskerville-Donovan, Inc. I acknowledge and agree that any falsification, misrepresentation or omission of facts in or concerning this application will prejudice my application for employment and may, if I become employed, result in termination of my employment.

## **Applicant Agreement**

## PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY

- 1. I authorize Baskerville-Donovan, Inc. to make an inquiry into statements made by me on this application and in the employment process, and acknowledge and agree that any falsification, misrepresentation or omission of facts will, at the option of the Company, result in making this application null and void, and may, if I become employed, result in termination of my employment. I understand further, that if the results of such inquiry are not satisfactory in the judgement of the Company, any offer of employment made by the Company may be withdrawn.
- 2. In making this application for employment, I agree to submit to a post-offer, pre-employment drug screen. Should the results of this screen be unsatisfactory, in the judgement of Baskerville-Donovan, Inc., the job offer will be withdrawn.
- 3. I understand and agree that my employment with Baskerville-Donovan, Inc. is considered at-will (unless specified otherwise by written contract), and that the employment relationship may be terminated, with or without cause and with or without notice, at any time at the discretion of either the Company or myself. Further, I agree that no manager or other representative of Baskerville-Donovan, Inc., other than an officer, has the authority to enter into any agreement, either oral or written, for employment for any specified period of time, or to make any agreement contrary to the foregoing. I understand that completion of this application does not indicate whether there are any positions currently open and that it does not obligate Baskerville-Donovan, Inc. to hire me.
- 4. I understand that as part of normal procedure for processing employment applications and employment requests a routine inquiry may be made concerning information on character, general reputation, work history and education. I authorize such inquiry and acknowledge that information on the nature and scope of such a report is available upon request.
- 5. Smoking is prohibited throughout Baskerville-Donovan, Inc. reserves the right to prohibit smoking in all Company facilities.
- 6. Any falsification, omission, or misrepresentation of information supplied by me, either orally or on any company documents, will be sufficient cause for termination from continued employment.

By typing my name in the following box, I certify that the information on this application to be true and correct to the best of my knowledge, that this information can be used for the purpose of processing my employment application and that I have read and agree to the items listed in the section, "Applicant Agreement" above.

Signature

Date