

HR use only:

Job category _____

File code _____

Employment Application



Last Name _____

First Name _____

M. Initial _____

Application Date _____

Thank you for considering Triple Crown Services in your career plans!

Please print, completing all sections of this Employment Application and providing full information, even if you are including a resume. If a request for information is not applicable, write "NA" (not applicable) or draw a line through it.

Applicants requiring reasonable accommodation to assist in completion of the application or interview processes should notify a Triple Crown Services representative.

It is the policy of Triple Crown Services Company that equal employment opportunities be available to all applicants and employees. Triple Crown Services does not discriminate on the basis of race, religion, national origin, color, sex, age, marital status, participation in military service, disability, or handicap.

PERSONAL INFORMATION

Name (Last, First, Middle Initial)		Date	
Complete Present Address			
Home Telephone Number	E-Mail Address	Work Telephone Number (if OK to call you)	Alternate Contact Number
Previous Address			Social Security Number
If requested, are you able to provide proof of employability (some examples include your Driver's License, Social Security Card, Passport)?		Have you been convicted of a felony in the past 7 years? If yes, please explain.	Do you have agreements with any current or former employers that might restrict your services to Triple Crown?
Applying for: Position or type of work:		<input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Temporary	Will you work overtime?
How did you hear about this position? <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> School <input type="checkbox"/> Friend <input type="checkbox"/> Just walked in to apply			
Employee Referral from: _____ Other: _____			

EDUCATION

Please list the last three schools attended, starting with the most recent. Please indicate if your school records are under a different name.

Name of School and Location	Number of Years Completed	Did You Graduate?	Degree or Diploma Received & Major	Grade or GPA

SKILLS, QUALIFICATIONS, & ACCOMPLISHMENTS

Computer formats/operating systems: _____ Software: _____

Typing Speed: _____ Other office equipment, specialized training, licenses, certifications, accomplishments:

EMPLOYMENT HISTORY

Please provide the following information for current and past employment, including military service, starting with the most recent. This section must be completed even if you are submitting a resume.

Employer	Telephone	Start Mo./Yr.	Starting Wage/Salary \$ per	Supervisor's Name
Address		Ending Mo/Yr	Ending Wage/Salary \$ per	May we contact for a reference?
Current or Ending Duties				
Starting Duties				
Reason for Leaving				

Employer	Telephone	Start Mo./Yr.	Starting Wage/Salary \$ per	Supervisor's Name
Address		Ending Mo/Yr	Ending Wage/Salary \$ per	May we contact for a reference?
Ending Duties				
Starting Duties				
Reason for Leaving				

Employer	Telephone	Start Mo./Yr.	Starting Wage/Salary \$ per	Supervisor's Name
Address		Ending Mo/Yr	Ending Wage/Salary \$ per	May we contact for a reference?
Ending Duties				
Starting Duties				
Reason for Leaving				

Employer	Telephone	Start Mo./Yr.	Starting Wage/Salary \$ per	Supervisor's Name
Address		Ending Mo/Yr	Ending Wage/Salary \$ per	May we contact for a reference?
Ending Duties				
Starting Duties				
Reason for Leaving				

REFERENCES

Please list three business/work references who are not related to you and are not current or previous supervisors. If not possible, please list school, personal, or other references who are not related to you.

Name	Business/School/Other	Telephone	How long has this person known you?

DRUG SCREEN

I understand that one of the requirements for employment at Triple Crown Services is a drug screen. I further understand that failure to consent to this drug screen will be considered withdrawal of my application for employment or resignation of my employment. I also understand that if the test discloses the illegal presence of one or more of the tested drugs, I will not be considered for employment at Triple Crown Services, or, if employment has already begun, employment will be terminated.

Date: _____ Signature: _____

APPLICANT'S STATEMENT

I hereby authorize Triple Crown Services or its agents to make inquiries about me to schools, investigative credit agencies, and other entities, and I authorize those entities to release information about me to Triple Crown Services. I further authorize Triple Crown Services to obtain, and my prior employers to release to Triple Crown Services, information regarding my employment history, including, but not limited to, my attendance and performance records. I hereby release all parties, including, but not limited to, Triple Crown Services, references, and current and previous employers, from any and all liability for any injury or damage that may result from their furnishing information concerning me or any action Triple Crown Services takes on the basis of such information. I understand that I have the right to request and receive information about the nature and scope of any such investigation.

I understand that Triple Crown Services will require me to undergo a drug screen. I agree to take a drug screen at the facility and date and time designated by Triple Crown Services, and I authorize the release of the results of the drug screen to Triple Crown Services, its authorized employees, or its agents. I further agree to take a physical examination, if Triple Crown Services requests, after an offer of employment is extended to me, and that any such physical examination will be conducted by a physician approved by Triple Crown Services and at the expense of Triple Crown Services. I authorize any such physician to release the results of any such physical examination to Triple Crown Services, its authorized employees, or its agents. I understand the results and findings of a drug screen or physical exam will not be released by Triple Crown Services unless required to do so by law or judicial process.

By signing this application, I affirm that all statements herein (and in my resume and any other provided documents) are TRUE AND COMPLETE, and misrepresentation or omission of facts may result in disqualification for consideration for employment, withdrawal of an offer of employment, or termination of employment.

I understand, that if I am employed, I may terminate the employment relationship at any time, and that Triple Crown Services may terminate the employment relationship at any time, without notice or cause. I understand the practices, statements, and benefits set out in policies, handbooks, and other company literature may be changed at any time by Triple Crown Services without notice, and that such practices and statements do not create an employment contract. I further understand that, if an offer of employment is extended, I will be required to submit documentation that will verify that I am a citizen or national of the United States, an alien lawfully admitted for permanent residence, or an alien authorized to be employed in the U.S.

Date: _____ Signature: _____