



Application for Employment

PERSONAL INFORMATION

Name (Last) _____ (First) _____ (MI) _____

Present Address _____
Street City State Zip

Permanent Address _____
Street City State Zip

Home Phone (_____) _____ Work Phone (_____) _____

Social Security Number _____ E-mail Address _____

EMPLOYMENT DESIRED

Position(s) _____ Date of Application _____

Date Available to Start Work _____ Desired Salary _____

How did you become aware of the vacancy? _____

Are you 18 years or older? Yes No

Are you currently employed? Yes No

May we contact you at your current job to arrange an interview? Yes No

May we contact your present employer for a reference? Yes No

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if the job requires it? Yes No

Have you ever completed an Application for Employment with us before? Yes No

If yes, when? _____

Have you ever been employed with IPHCA or CQA before? Yes No

If yes, when, and in what position? _____

Reason for leaving _____

Are you legally eligible to work in the United States? Yes No

(Proof of eligibility will be required upon offer of employment)

Do you have a valid driver's license? Yes No

Have you ever plead "guilty" or "no contest" to, or been convicted of a felony? Yes No

(Conviction will not necessarily disqualify you)

If so, please provide date(s) and details _____





EDUCATION

	School Name and Location	Years Attended	Year of Graduation	Subjects Studied or Degree Obtained
Grammar / Elementary School				
High School				
College				
Graduate				
Trade, Business, Correspondence or Vocational School				
Other				

List any academic honors, scholarships, offices held, etc _____





PREVIOUS EMPLOYMENT

Please list below your last three employers, starting with the most recent.

1.	Name of Employer	Employment Dates From _____ (month / year) To _____ (month / year)
	Address	
	Business Phone Number	
	Supervisor's Name and Title	
	Name Under Which Employed	
	Job Title	Avg # hrs worked
	Job Duties (be specific)	per week _____
	Reason for Leaving	Salary Starting \$ _____
		Ending \$ _____

2.	Name of Employer	Employment Dates From _____ (month / year) To _____ (month / year)
	Address	
	Business Phone Number	
	Supervisor's Name and Title	
	Name Under Which Employed	
	Job Title	Avg # hrs worked
	Job Duties (be specific)	per week _____
	Reason for Leaving	Salary Starting \$ _____
		Ending \$ _____





3.	Name of Employer	Employment Dates From _____ (month / year)
	Address	
	Business Phone Number	
	Supervisor's Name and Title	
	Name Under Which Employed	To _____ (month / year)
	Job Title	Avg # hrs worked per week _____
	Job Duties (be specific)	
	Reason for Leaving	Salary Starting \$ _____ Ending \$ _____

REFERENCES

Please list below the names of three persons not related to you and are not previous supervisors, who you have known for at least one year, and who have knowledge of your work qualifications and can serve as a professional reference for you.

Name	Address	Phone Number	Relationship / Occupation	Years Acquainted
1.				
2.				
3.				

SERVICE RECORD

Branch of Service _____ Discharge Rank _____ Discharge Date _____

Job-related training received (dates and description) _____

Present Membership in National Guard or Reserves _____ Date Obligation Ends _____





GENERAL

Subjects of special study or research work _____

Special training, apprenticeships, licenses or certifications _____

Special skills _____

Foreign Language Skills _____

Any other information which you would like us to consider _____

AUTHORIZATION

I certify that all the information submitted by me on this application (or any other accompanying or required documents) is correct, accurate and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

I understand that submission of an application does not guarantee employment. I understand that none of the documents, policies, procedures, actions, or statements of CQuest America Inc. (CQuest) or its representatives used during the employment process is deemed a contract of employment, either real or implied. I understand that no CQuest representative, other than its President, and then only when in writing and signed by the President, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing.

In consideration of my employment, if employed, I agree to conform to the rules, regulations, policies and procedures of CQuest at all times, and I understand that such compliance is a condition of employment. I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or CQuest's option, except as otherwise provided by law. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause and with or without notice, at any time by CQuest, except as otherwise provided by law.

I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to CQuest and/or any of its representatives, agents or vendors, and I release all parties involved from any and all liability for any and all damage that may result from providing such information.

By signing below, I acknowledge that I have read, understand, and agree to the above statements.

Signature _____ Date _____

