

## AN EQUAL OPPORTUNITY EMPLOYER

FIRST NAME & MIDDLE INITIAL	SSN	DATE OF BIRTH
PHONE 2	EMAIL ADDRESS	
	Are you a U.S. citizen? Y or N	
	If yes, which branch?	
	If yes, please explain.	
	If yes, please explain.	
		PHONE 2  EMAIL ADDRESS  Are you a U.S. citizen? Y or N  If yes, which branch?  If yes, please explain.

EMERGENCY CONTACT			
NAME	PHONE 1	PHONE 2	RELATIONSHIP

APPLICANT POSITION			
What position are you applying for?			
How did you learn of the position available?			
EMPLOYMENT TYPE DESIRED	HOURLY RATE DESIRED	SALARY DESIRED	AVAILABLE START DATE
Full Time / Part Time / Temp			

EDUCATION			
SCHOOL NAME	LOCATION	YEARS ATTENDED	MAJOR & DEGREE EARNED
OTHER / APPLICABLE TRAINING			
APPLICABLE SKILLS / PROFICIENCIES			
MOST RECENT ADDRESSES			
	СІТҮ	STATE	ZIP CODE
	СІТҮ	STATE	ZIP CODE
	СІТҮ	STATE	ZIP CODE
NO. & STREET	СІТҮ	STATE	ZIP CODE
NO. & STREET			ZIP CODE
MOST RECENT ADDRESSES  NO. & STREET  EMPLOYMENT HISTORY  EMPLOYER NAME	POSITION HELD	STATE  START DATE	ZIP CODE  END DATE

## DISCLAIMER / AUTHORIZATION / LEGAL STATEMENT

I hereby authorize SITECH South LLC and/or its representatives to gather background information regarding the following: Information from previous employers, whether contained in written records or not; all public/private records, including criminal, civil, driving, credit and education; and other pertinent information relating to the successful function of the job for which I am considered. Finally, I hereby release SITECH South LLC, its authorized agents, former employers, and other references, and I knowingly understand and agree that there is no invasion of personal privacy. I understand that my background verification will be conducted in order to ensure the business standards and practices of SITECH South LLC and will be held strictly confidential.

The applicant acknowledges that any offer of employment that is made by SITECH South LLC may be contingent upon my successful completion of a physical examination that conforms to the requirements and specifications of the Americans with Disabilities Act and/or the successful completion of a drug test that conforms to state and federal laws.

I also understand that any employment offer is contingent upon my providing, within three (3) days of employment, valid proof of identity and eligibility to work in compliance with the Immigration Reform and Control Act of 1986.

I acknowledge that if I am employed, such employment is not for a definite period to time, and that SITECH South LLC can change wages, benefits, hours of employment, and conditions at any time without notice. I understand that either I or SITECH South LLC can terminate the employment relationship at any time, with or without prior notice, for any reason not prohibited by law. In the event that I leave SITECH South LLC, I will promptly pay any balance owed for merchandise, equipment or uniforms issued to me and damaged or not returned, or other indebtedness to SITECH South LLC. Finally, I authorize SITECH South LLC to apply any money due to me for wages, salary, and commissions toward liquidation of this indebtedness, except where prohibited by law.

BY SIGNING THIS APPLICATION FOR EMPLOYMENT, I CERTIFY THAT I HAVE READ AND UNDERSTAND ALL PARTS OF IT AND CERTIFY THAT I HAVE FULLY AND COMPLETELY ANSWERED ALL QUESTIONS. I UNDERSTAND THAT ANY MATERIAL MISREPRESENTATION OR OMISSION OF A MATERIAL FACT IN THE APPLICATION MAY BE JUSTIFICATION FOR REFUSAL OF, OR IF EMPLOYED, TERMINATION OF EMPLOYMENT, REGARDLESS OF WHEN SUCH FALSIFICATION IS DISCOVERED. I HEREBY CERTIFY THAT I AM NOT A MEMBER OF ANY ORGANIZATION DEEMED SUBVERSIVE TO THE INTEREST OF THE U.S. GOVERNMENT.

SIGNATURE			
PRINTED NAME	SIGNATURE	DATE	