



APPLICATION FOR EMPLOYMENT

INSTRUCTIONS: PLEASE FURNISH COMPLETE AND ACCURATE INFORMATION. INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. FEDERAL LAWS AND REGULATIONS REQUIRE FERNO-WASHINGTON, INC. (FERNO) TO INVESTIGATE AND VERIFY INFORMATION PROVIDED. INFORMATION PROVIDED ON APPLICATIONS WILL BE VERIFIED.

LAST NAME (print)		FIRST NAME	MIDDLE NAME	OTHER NAME(S) USED		SOCIAL SECURITY NO.		
PRESENT ADDRESS: NO. AND STREET			APT. OR BOX NO.	CITY		STATE	ZIP	
HOW LONG HAVE YOU LIVED THERE?		TELEPHONE NUMBER			ALTERNATE PHONE NO.			
WHO REFERRED YOU TO FERNO?			CAN YOU, IF OFFERED EMPLOYMENT, VERIFY YOUR LEGAL RIGHT TO WORK IN THE UNITED STATES? YES _____ NO _____					
ARE YOU AT LEAST 18 YEARS OF AGE? YES _____ NO _____ IF NO, HOW OLD ARE YOU? _____								
HAVE YOU EVER APPLIED OR WORKED FOR FERNO BEFORE? YES _____ NO _____ IF YES, WHERE AND WHEN? _____								
NAMES OF ALL RELATIVES WHO EVER WORKED FOR FERNO AND LOCATIONS(S):								
FOR WHAT POSITIONS(S) ARE YOU APPLYING?								
ARE YOU NOW ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB(S) FOR WHICH YOU ARE APPLYING WITH OR WITHOUT A REASONABLE ACCOMMODATION? YES _____ NO _____								
WHEN ARE YOU AVAILABLE TO START WITH FERNO?			CAN YOU WORK ANY SHIFT? YES _____ NO _____			EXPECTED RATE/SALARY		
HAVE YOU BEEN CONVICTED BY A CIVILIAN OR MILITARY COURT FOR VIOLATING ANY LAW? YES _____ NO _____ IF YES, LIST ALL CONVICTIONS, INCLUDING MOVING TRAFFIC OFFENSES. (NOTE: A CONVICTION WILL NOT NECESSARILY BAR HIRING.)					DATE	PLACE	OFFENSE	PENALTY
					1)			
					2)			
					3)			
EDUCATION	SCHOOL NAME(S)	CITY	STATE	DID YOU GRADUATE?	DIPLOMA OR DEGREE EARNED	HONORS RECEIVED		
HIGH SCHOOL				YES _____ NO _____				
BUSINESS/TRADE SCHOOL				YES _____ NO _____				
COLLEGE				YES _____ NO _____				
OTHER EDUCATION				YES _____ NO _____				
LIST THE NAMES, ADDRESSES, AND TELEPHONE NUMBERS OF THREE REFERENCES NOT RELATED TO YOU AND NOT PRIOR EMPLOYERS:								
1.)								
2.)								
3.)								

ALL APPLICANTS MUST COMPLETE THE SECOND PAGE OF THIS FORM AND SIGN THE SECOND PAGE

EXPERIENCE AND QUALIFICATIONS

EMPLOYMENT HISTORY

ADDITIONAL INSTRUCTIONS: LIST YOUR EMPLOYMENT HISTORY STARTING WITH YOUR CURRENT OR MOST RECENT EMPLOYER. ACCOUNT FOR ALL PERIODS, INCLUDING MILITARY SERVICE AND PERIODS OF UNEMPLOYMENT. IF THE SPACE PROVIDED DOES NOT COVER AT LEAST 10 YEARS, ATTACH AN ADDITIONAL SHEET.

MAY FERNO-WASHINGTON, INC. CONTACT YOUR CURRENT EMPLOYER? YES _____ NO _____

FROM: (MO/YR)	TO: (MO/YR)	FIRM NAME	ADDRESS	BASE EARNINGS	REASON FOR LEAVING
JOB TITLE AND DUTIES:			SUPERVISOR'S NAME PHONE		
FROM: (MO/YR)	TO: (MO/YR)	FIRM NAME	ADDRESS	BASE EARNINGS	REASON FOR LEAVING
JOB TITLE AND DUTIES:			SUPERVISOR'S NAME PHONE		
FROM: (MO/YR)	TO: (MO/YR)	FIRM NAME	ADDRESS	BASE EARNINGS	REASON FOR LEAVING
JOB TITLE AND DUTIES:			SUPERVISOR'S NAME PHONE		
FROM: (MO/YR)	TO: (MO/YR)	FIRM NAME	ADDRESS	BASE EARNINGS	REASON FOR LEAVING
JOB TITLE AND DUTIES:			SUPERVISOR'S NAME PHONE		

WHY DO YOU BELIEVE FERNO SHOULD HIRE YOU?

Acknowledgement and Agreement (Read Carefully Before Signing)

- 1.) The information contained above in this Application is true to the best of my knowledge and belief, and I understand and agree that any misrepresentation or false or incomplete statement by me in connection with the Application may cause Ferno-Washington, Inc. not to employ me or, if I am employed, to terminate my employment at any time.
- 2.) I authorize the investigation of all statements contained in this application (and accompanying resume, if any). I also authorize the Company to contact my present employer (unless otherwise noted in this application form) and past employers, and I authorize any person, school, current employer (except as previously noted), past employer's). And organizations named in this application form to provide the Company with relevant information and opinions that may be useful in making a hiring decision, and I release such persons and organizations from any legal liability for making such statements. I understand that the Company may request an investigative consumer report from a consumer reporting agency. Under the Federal Fair Credit Reporting Act, I have the right to make a written request to the Company, within a reasonable time, for the disclosure of the name and address of the consumer reporting agency so that I can obtain a complete disclosure of the nature and scope of the investigation, if any such investigation is made for the Company
- 3.) I understand that employment by Ferno-Washington, Inc. is contingent upon my (1) submitting to a medical examination and substance screenings prior to starting to work; and (2) satisfying any other qualifications as determined by Ferno. If employed, I agree to submit to job-related examinations from time to time during the course of my employment whenever requested by Ferno. Such examinations will be performed by persons designated by Ferno and at Ferno's expense. I hereby authorize such examiners to furnish the results of such examinations to Ferno.
- 4.) If I am employed by Ferno-Washington, Inc., I agree to comply with all orders, rules, and regulations issued by Ferno, and I acknowledge that said orders, rules and regulations do not constitute an agreement for a term of employment contrary to paragraph 5 below.
- 5.) I hereby acknowledge that this application is for an employment of indefinite duration, terminable at will, for any reason either by myself or by Ferno-Washington, Inc. unless otherwise provided in writing by the terms of either a personal written and dated contract signed by the President of Ferno-Washington, Inc. and by me.
- 6.) I understand that no coach or champion other than the President of Ferno-Washington, Inc. has authority to make an agreement (oral, written, or implied) or other representations contrary to paragraph 5 above.
- 7.) I agree that, if I am employed by Ferno-Washington, Inc. as conditions of my continued employment by Ferno, I will furnish proof of my age and lawful right to work in the United States.

Applicants Signature: _____

Date: _____