



STAFFLINK OUTSOURCING, INC.

Application for Employment

Applicant Last Name: _____ First Name: _____ Client: _____

StaffLink is an Equal Employment Opportunity Employer. We consider applications for all positions without regard to race, religion, sex, national origin, age, family status, veteran status, disability, or other legally protected status. If you feel you are subjected to any type of discrimination and/or harassment, contact StaffLink immediately at (954) 423-8262 to obtain assistance in the resolution of such issues. Failure to complete this application properly and in its entirety will result in the application to not be processed. Please list any period of time that you were not employed.

PERSONAL INFORMATION Complete *all* applicable information

Name (Full - Last, First, MI):			
Current Street Address:	City:	State:	Zip
Previous Street Address:	City:	State:	Zip
Home Phone:	Alternate Phone:		
Position(s) applied for:		Date you can be working:	
Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No If you are under 18 years of age, please state your age: _____ (Written proof is required)		Are you willing to work: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> Weekends <input type="checkbox"/> Evenings <input type="checkbox"/> Nights	
Have you ever applied for employment with StaffLink Outsourcing? <input type="checkbox"/> Yes <input type="checkbox"/> No When? _____ Where? _____		Have you previously been employed by StaffLink Outsourcing? <input type="checkbox"/> Yes <input type="checkbox"/> No Where? _____	
Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No (Proof of eligibility will be required)		Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, may we contact your employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever been convicted of a felony or crime? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please explain:			
<i>A conviction does not necessarily disqualify an applicant unless it relates to the duties of the position. Factors such as your age at the time of the offence, severity and nature of the violation, rehabilitation and duties of the position applied for will be taken into account.</i>			

EMPLOYMENT HISTORY (List below last three employers, starting with the most recent one first)

Present or Last Position:		Name of Company:		From Mo/Yr:		To Mo/Yr:	
Street Address:			City:		State:		Zip:
Duties:			Reason for Leaving:				
Starting Annual Salary:		Final Annual Salary:		Bonus:		Commission:	
May we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No							
Name of Supervisor:			Title and Department of Supervisor:			Phone Number of Supervisor:	
Next Previous Position:		Name of Company:		From Mo/Yr:		To Mo/Yr:	
Street Address:			City:		State:		Zip:
Duties:			Reason for Leaving:				
Starting Annual Salary:		Final Annual Salary:		Bonus:		Commission:	
Name of Supervisor:			Title and Department of Supervisor:			Phone Number of Supervisor:	
Next Previous Position:		Name of Company:		From Mo/Yr:		To Mo/Yr:	
Street Address:			City:		State:		Zip:
Duties:			Reason for Leaving:				
Starting Annual Salary:		Final Annual Salary:		Bonus:		Commission:	
Name of Supervisor:			Title and Department of Supervisor:			Phone Number of Supervisor:	

EDUCATION INFORMATION

High School or GED:	Address:	City:	State:	Degree:	Subjects Studied:	
College:	Address:	City:	State:	Degree:	Major:	GPA:
Graduate School:	Address:	City:	State:	Degree:	Major:	GPA:
Other:	Address:	City:	State:	Degree:	Major:	GPA:

SKILLS/EXPERIENCE (Please list any skills or experience that relate to and support your qualifications for this position)

List skill or experience:	Indicate the skill level achieved:
_____	_____
_____	_____
Professional affiliations(Please do not list information that would disclose race, age ethnic origin, religious or political affiliation):	Years affiliated:
_____	_____
_____	_____
Personal references:	Phone number:
_____	_____
_____	_____
Where applicable, a drug and/or alcohol test will be required. Some positions require that all applicants take a pre-employment physical examination. If offered such a position, do you consent to this physical exam before beginning work? <input type="checkbox"/> Yes <input type="checkbox"/> No	If applicable, do you have a valid driver's license or chauffeur's license as a requirement for this position? <input type="checkbox"/> Yes <input type="checkbox"/> No (Motor vehicle license verification is ordered for all such positions.)

Applications are kept in our active file for thirty days. You may submit a new application for any position at any time.

STATEMENT OF AFFIRMATION

I acknowledge that the information that I have supplied is correct to the best of my knowledge and understand that any misrepresentation or omissions of facts during the hiring process may be grounds for rejection of my application or termination.

I freely and voluntarily agree to submit to a drug and/or alcohol test, when and were applicable, and as may be allowed by state or federal law as part of my application for employment and that any offer of employment is conditional upon passing said pre-employment testing. An applicant testing positive for drugs during a pre-employment drug test will not be eligible to work for Stafflink and may not re-test for a period of one-year. I understand that as an applicant as well as an employee (should I be hired), that I may be required to submit to said drug and/or alcohol testing as may be permitted under state or federal law. I further understand that refusal to submit to said drug and/or alcohol testing as is permitted by law, or the positive testing for prohibited drugs or alcohol in accordance with standards established by either state or federal law, may result in disciplinary action, including immediate suspension and/or termination of employment.

If employed, I agree to conform to the rules and regulation of StaffLink. Under the Fair Labor Standards Act, I understand that any tips I may earn must be reported to Stafflink and that if I should fail to report these amounts; I will be subject to disciplinary action up to and including termination. I also agree that, if hired, I have the right to resign my employment any time, with or without cause, and with or without notice, at any time at the option of either StaffLink or myself. I understand that no manager or representative of StaffLink has any authority to enter into any agreement for employment for any specified period of time or make any agreement or contract related to the foregoing either now, in the past or in the future. I further understand that this acknowledgement supersedes any prior oral or written understanding.

I have read in full and understand the above and agree that a reproduced copy of this affirmation will be valid as original. **I acknowledge** and agree that if at any time I am subjected to any type of discrimination and/or harassment, I will contact my supervisor and/or Stafflink immediately to obtain assistance in the resolution of such matters.

Date:	Signature:
_____	_____



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INFORMED CONSENT AND RELEASE OF LIABILITY

I understand that in connection with my application for employment a consumer report may be requested for employment purposes. All inquiries will be handled in compliance with applicable law including provisions of the Fair Credit Reporting Act, 15 U.S.C. Section 1681, et seq. I understand that the employment will be subject to the results of these inquiries. The report may include, but is not limited to, the following areas:

Verification of social security number; current/previous residences; employment history; education including transcripts; character references; credit history and reports when applicable; criminal records from any criminal justice agency in any/all federal, state county, jurisdictions; motor vehicle records; and any other public records or to conduct interviews with third parties relative to my character, general reputation, or personal characteristics.

I hereby waive any an all written notice of disclosure that may be required by the applicable local, state or federal laws of my past and /or present employer(s), individuals, or institutions. In exchange for the consideration of my employment application by StaffLink, I hereby release and forever discharge, without reservation, StaffLink (including its directors, officers, employees, its agents, contractors, and subcontractors) and my past and/or present employers (their directors, officers, employees, and agents) from any liabilities that my result from an investigation of my past and/or present employment or from the disclosure of any information.

I further acknowledge that a telephone facsimile (FAX) or photographic copy of this document will be valid as original.

THIS INFORMED CONSENT AND RELEASE PROVIDES THAT YOU KNOWINGLY AND VOLUNTARILY AGREE TO RELEASE CERTAIN PERSONAL RIGHTS. IT MAY BE ADVISABLE FOR YOU TO SEEK LEGAL COUNSEL PRIOR TO ENTERING INTO THIS AGREEMENT.

Applicant's signature: _____

Please print name: _____ Today's date: _____

Date of Birth (*for background verification purposes only*): _____

Social Security Number (*for background verification purposes only*): _____

Drivers License Number / State (*for background verification purposes only*): _____

Expiration Date: _____