

DREAM FACTORY

EMPLOYMENT APPLICATION

APPLICANT INFORMATION					
Last Name	First	M.I.	Date		
Street Address			Apartment/Unit #		
City	State		ZIP		
Phone	Alternate Phone				
Social Security Number		Date of Birth			
Email Address:					
Are you a citizen of the United States?	YES	NO	If no, are you authorized to work in the U.S.?	YES	NO
Have you ever worked for this company?	YES	NO	If so, when?		
Have you ever been convicted of a felony?	YES	NO	If yes, explain		

Are you 16 years of age or older?

REFERENCES	
Please list three professional references.	
Full Name	Phone ()
Full Name	Phone ()
Full Name	Phone ()

CURRENT/ PREVIOUS EMPLOYMENT	
Company Name/ Address	Phone ()
From To	Ending Salary \$ Reason for Leaving

DISCLAIMER AND SIGNATURE

- I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release no matter when discovered by the Company.
- I understand that if I am hired by the company, that I will be required to attest to my identity and employment eligibility, and to present documents confirming my identity and employment eligibility. **You cannot be hired if you cannot comply with these requirements.**
- I understand that any employment is conditioned on a background check and I authorize the Company to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character, and general reputation to the Company, without giving me prior notice of such disclosure. In addition, I release the Company, any former employers, and all references listed above from any and all claims, demands or liabilities arising out of or related to such investigation or disclosure.
- If I am offered employment, I agree to submit to a medical examination and drug test before starting work. If employed, I also agree to submit to a medical examination or drug test and any time deemed appropriate by the Company and as permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclose to the Company the results of the examination, which results shall remain confidential and segregated from my personnel file. I understand that my employment, or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test, and if I am hired a condition of my employment will be that I abide by the Company Expectations which includes, but is not limited to, drug and alcohol policies. The company reserves the right to revise its policies and procedures in whole, or in part, at any time.
- I understand and agree that nothing contained in this application, or conveyed during my interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time with or without cause and without prior notice, at the option of either myself or the Company. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Company unless made in writing.

Signature

Date