

## **Employment Application**

| Applicant Information          |  |  |  |  |  |  |  |
|--------------------------------|--|--|--|--|--|--|--|
| Full Name:                     |  |  | Date:  |  |  |  |  |
| ٨ ما ما مومور                  |  |  |  |  |  |  |  |
| Address:                       | Street Address   |  | Apartment/Unit #   |  |  |  |  |
|                                | City   |  | State ZIP Code   |  |  |  |  |
| Phone:                         |  | Email:   |  |  |  |  |  |
| Driver's<br>License #:         |  | License<br>State:_                                   |  |  |  |  |  |
| Social<br>Security<br>Number:  |  | Date of<br>Birth:_                                   |  |  |  |  |  |
| The under assigns, purposes, a | , to obtain copies of consumer reports, included and for use in rating and/or underwriting insur | insurance<br>ing a moto<br>rance for w<br>sumer repo | agency, Consolidated Insurance Group, LLC, or its or vehicle report, pertaining to me for employment which the above-named employer may apply and any orts, a consumer reporting agency may be used, and |  |  |  |  |
| I certify that                 | my answers are true and complete to the be-  | st of my kr  | nowledge.  |  |  |  |  |
|                                | ation leads to employment, I understand that n my release.                                       | false or m   | nisleading information in my application or interview  |  |  |  |  |
| Signature:                     |  |  | Date:  |  |  |  |  |
|                                |  |  |  |  |  |  |  |
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| Date Available to Start work:                           | Desired S   | alary: <u>\$</u> |           |          |                   |                                |    |
|---|-------------|------------------|-----------|----------|-------------------|--------------------------------|----|
| Position Applied for:                                   |             |                  |           |          |                   |                                |    |
| Willingness to work out of town up to consecutive days? | 14 YE       | ES NO            | Willingn  | ess to v | work and climb at | theights more YES than 300 ft. | NO |
| Are you a citizen of the United States                  | YE<br>?     | ES NO            | If no, a  | re you a | authorized to wor | YES k in the U.S.?             | NO |
| Have you ever worked for this compa                     | YE<br>ny?   | ES NO            | If yes, v | when?_   |                   |                                |    |
| Have you ever been convicted of a fe                    | YE<br>lony? | ES NO            |           |          |                   |                                |    |
| If yes, explain:  |             |                  |           |          |                   |                                |    |
| Education   |             |                  |           |          |                   |                                |    |
| High School:  |             | Address          | :         |          |                   |                                |    |
| From: To:   | Did yo      | u graduate?      | YES       | NO       | Diploma:          |                                |    |
| College:  |             | _ Address        | :         |          |                   |                                |    |
| From: To:   | Did yo      | u graduate?      | YES       | NO       | Degree:           |                                |    |
| Other:  |             | _ Address        | :         |          |                   |                                |    |
| From: To:   | _ Did yo    | u graduate?      | YES       | NO       | Degree:           |                                |    |
|   |             | Refer            | rences    |          |                   |                                |    |
| Please list three professional refere                   | nces.       |                  |           |          |                   |                                |    |
| Full Name:  |             |                  |           |          | Relationsl        | -                              |    |
| Company:  |             |                  |           |          | Pho               | ne:                            |    |
| Address:  |             |                  |           |          |                   |                                |    |
| Full Name:  |             |                  |           |          | Relationsl        | hip:                           |    |
| Company:  |             |                  |           |          | Pho               | ne:                            |    |
| Address:  |             |                  |           |          |                   |                                |    |
| Full Name:  |             |                  |           |          | Relationsl        | hip:                           |    |
| Company:  |             |                  |           |          | Pho               | ne:                            |    |
| Address:  |             |                  |           |          |                   |                                |    |

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|                     | Previous E                              | mployme          | ent                      |                   |  |
|---------------------|---|------------------|--------------------------|-------------------|--|
| Company:            |   |                  |                          | Phone:            |  |
| Address:            |   |                  |                          | Supervisor:       |  |
| Job Title:          | Starting S                              |                  | Ending Salary:           |                   |  |
| Responsibilities: _ |   |                  |                          |                   |  |
| From:               | To:                                     | Reason f         | or Leaving:_             |                   |  |
| May we contact yo   | ur previous supervisor for a reference? | YES              | NO                       |                   |  |
| Company:            |   |                  |                          | Phone:            |  |
|                     |   |                  |                          | Supervisor:       |  |
| Job Title:          | Starting S                              | Ending Salary:\$ |                          |                   |  |
| Responsibilities: _ |   |                  |                          |                   |  |
| From:               | To:                                     | Reason f         | or Leaving:_             |                   |  |
|                     | ur previous supervisor for a reference? | YES              | NO                       |                   |  |
| Company:            |   |                  |                          | Phono             |  |
|                     |   |                  |                          | Phone:Supervisor: |  |
| Job Title:          | Starting S                              |                  | Ending Salary: <u>\$</u> |                   |  |
| Responsibilities: _ |   |                  |                          |                   |  |
| From:               | To:                                     | Reason f         | or Leaving:              |                   |  |
| May we contact yo   | ur previous supervisor for a reference? | YES              | NO                       |                   |  |
|                     | Military                                | / Service        |                          |                   |  |
| Branch:             |   |                  | From:_                   | To:               |  |
| Rank at Discharge   | :                                       | f Discharge:_    |                          |                   |  |
| If other than honor | able, explain:                          |                  |                          |                   |  |