

### APPLICATION FOR EMPLOYMENT

Please provide complete and legible information. An incomplete application may affect your consideration for employment. If necessary, attach a separate sheet for additional information.

Anita Lead is committed to a policy of Equal Employment Opportunity and will not discriminate against an applicant or employee on the basis of race, color, religion, creed, national origin or ancestry, sex, age, physical or mental disability, veteran or military status, genetic information, sexual orientation, marital status, or any other legally recognized protected basis under federal, state or local laws, regulations or ordinances. The information collected by this application is solely to determine suitability for employment, verify identity and maintain employment statistics on applicants.

Applicants with disabilities may be entitled to reasonable accommodation under the terms of the Americans with Disabilities Act and certain state or local laws. A reasonable accommodation is a change in the way things are normally done which will ensure an equal employment opportunity without imposing undue hardship on Anita Lead. Please inform the company's personnel representative if you need assistance completing any forms or to otherwise participate in the application process.

Your application will be active for 90 days. If you are not hired during that time period, but wish to continue to be considered for available positions, you must complete a new application.

Upon employment, employees of Anita Lead may be required to have their picture taken or to provide Anita Lead with a picture of themselves.

#### **GENERAL INFORMATION**

Full Name FIRST	MIDDI F	LAST	Date_	
		2.0.		
Address STREET		CITY	STATE	ZIP
Contact Number ()	Date availa	able for work		_
Alternate Contact Number (_	)	E-mail (optional)		
Are you legally authorized to v (If hired, verification will be requ				
Are you at least 18 years old (If no, you may be required				

POSITION					
Applying for:					
Salary range exp	ected	<b>[ ]</b> Full-time	[ ] Part-time		
EDUCATION INFORMATION					
Type of School	School Name and Location	Highest Grade Completed	Grade Point Average	Course of Study or Major	
High School or G.E.D. equivalent		9 10 11 12 GED			
College or University		1 2 3 4			
Vocational or Trade School					
Graduate School					
Other (including military)					
List any work-rela	ted certifications or licenses	s you currently possess.			
	BAC	CKGROUND INFORMATION			
	seven years, have you ever been o If yes, please explain.	n discharged, suspended or aske	ed to resign from a	any position?	
	of verifying information on this a ganizations you have listed?		d or attended scho	ool under a different name at	
If yes, specify	r name				
	PRO	FESSIONAL REFERENCES	<u> </u>		
List three professional references (other than those listed as current/former supervisor) that we may contact:					
I	nal references (other than those	·	=	•	

AN EQUAL OPPORTUNITY EMPLOYER

## **EMPLOYMENT RECORD**

List all employment experience for the past seven years, starting with the most recent or present employer, including US Military Service. Using a separate section for each position. describe in detail all work experience. including periods of unemployment. You may include as part of your employment history any verified work performed on a volunteer basis. Resumes may not be substituted in lieu of completing the following employment information.

Current Employer	Phone ()	
Geographic Location	From	
Your Position	Month To	Year
Supervisor's Name/Title		
May we contact?  Yes  No If not, why?  Primary responsibilities	Month Reason for Leaving	Year
Employer	Phone ()	
Geographic Location	From	
Your Position	To Month	Year
Supervisor's Name/Title		
Primary responsibilities	Month Reason for Leaving	Year
Employer	Phone ()	
Geographic Location	From	
Your Position	Month To	Year
Supervisor's Name/Title		
Primary responsibilities	Month Reason for Leaving	Year
[Have you signed or otherwise agreed to any [ ] Yes [ ] No If yes. explain:	non-solicitation, non-competition, or other similar agn	eement with any prior employer?
		eement with any prior employer?

# **AUTHORIZATION RELEASE FOR BACKGROUND INVESTIGATION**

To Whom It May Concern:				
I,, hereby authorize an may include my character, general reputation, personal characte application of employment with Anita Lead.	independent investigation of my background, which ristics, and mode of living in connection with an			
The Scope of the report may include information concerning my worker's compensation record, education, credentials, identity, p employment and personal references.				
I authorize and request any present or former employer, state/federal government office, state department of motor vehicles, credit bureaus, school, police department, court records, including those maintained by both public and private organizations, financial institution or other persons having personal knowledge about me to furnish any and all information in their possession regarding me for the purpose of confirming the information contained on my Application and/or obtaining other information which may be material to my qualifications for employment. I am willing that a photocopy of this authorization be accepted with the same authority as the original, and I specifically waive any written notice from any present or former employer who may provide information based upon this authorization request.				
The following is my true and complete legal name and all information				
Print Full Name:Print Maiden Name or Other Names Used:Present Address:				
City:State Date of Birth (for I.D. purposes only):/	e: Zip Code:			
Social Security Number:				
Driver's License Number:	State of Issue:			
Applicant's Signature	Date			
DRUG AND ALCOHOL TESTIN	IG CONSENT FORM			
I hereby agree, as a condition for my further consideration for er alcohol test and to furnish a sample of my urine, breath, and/or permission to have Anita Lead send the specimen or specimens spresence of alcohol and/or any prohibited substances (which have and for the laboratory or other testing facility to release any and and/or to any governmental agency involved in a legal proceeding	blood for analysis. I further authorize and give full so collected to a laboratory for a screening test for the e been declared illegal under federal or state law), all documentation relating to such test to Anita Lead			
I understand and agree that if I refuse to submit to this test, I w understand and agree that if the screening test indicates that I h bloodstream or urine, or if I have a blood alcohol content in excerejected.	ave any amount of prohibited substances in my			
I will hold harmless Anita Lead, any physicians or medical person test, and any testing laboratory that Anita Lead may use from an testing, including failure to be considered for employment. I will medical personnel that it utilizes to conduct the drug and alcohol use for any alleged harm that may result to me from the release the drug and alcohol test, as long as the release or use of this indescribed above.	y alleged harm that may result to me from such further hold harmless Anita Lead, any physicians or test, and any testing laboratory that Anita Lead may or use of information or documentation relating to			
I acknowledge that I have read and understand this Consent For Lead will answer, any questions that I may have about the drug				
Applicant's Signature	Date			

## PLEASE READ CAREFULLY AND INITIAL EACH PARAGRAPH BEFORE SIGNING

I have disclosed all information that is relevant and should be considereInitials	d applicable to my candidacy for employment.
I understand, where permissible under applicable state and local law, I r a conditional offer of employment, and must receive a negative result fowith Anita Lead. Initials	
I understand, where permissible under applicable state and local law. I receiving a conditional offer of employment to investigate my criminal related to my suitability for employment. I understand that a separate di background check. Initials	background, driving record, credit history and other matters
I hereby certify that the information given by me is true in all respects. prior employers and all others (with the exception of my current employ application as "No") for the purpose of verification of the information I ha the information released. I authorize employers, schools and other perstranscripts requested. Initials	er, only if I have marked "May we contact?" on page 3 of this ve supplied and release same from any liability resulting from
I understand employment with Anita Lead is also contingent on my pro- identity and eligibility to work in the United StatesInitials	viding sufficient documentation necessary to establish my
I hereby certify that, if employed, my employment with Anita Lead will default under, any contract, agreement or understanding that I am a pathis application, if any.  Initials	
I hereby certify that, if employed, my employment with Anita Lead will no covenant or agreement I have with any of my prior employers, other theInitials	
I hereby certify that, if employed. I will report to my supervisor, a represer I am ever harassed by someone in the company or if I ever become awarInitials	
I expressly understand and agree that, if employed, my employ consent and may be terminated at will, with or without cause, notice to the other, unless otherwise prohibited by law. Initials	
I understand that no representation, whether oral or written, by an constitute an implied or express contract of employment. I further ur authority to enter into an agreement for employment for any speci procedure, benefit or other terms or condition of employment other theInitials	derstand no representative or agent of Anita Lead has the fied period of time or to make any change in any policy,
I certify that all of the above information is true and complete, and I may disqualify you from further consideration for employment or, if hir before discovery.	
Note: An offer of employment is conditioned upon complying wit to, signing a separate disclosure and consent form prior to any b	
MY SIGNATURE IS EVIDENCE THAT I HAVE READ AND AGE	REE WITH THE ABOVE STATEMENTS.
Applicant's Signature	Date