



### Information

*Legendary Solutions is an equal opportunity and affirmative action employer.*

Please fill this application out completely. If you have a resume', please feel free to attach it to this completed application.

Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Last Name First Name Middle Initial

Primary Address: \_\_\_\_\_ Time lived here \_\_\_\_\_

Street City State Zip Years / Months

Mailing Address: \_\_\_\_\_

Street City State Zip

Contact Info: \_\_\_\_\_

Home Phone Mobile Phone Email Address

Facebook Page Name: \_\_\_\_\_ LinkedIn Page Name: \_\_\_\_\_

### Position

Position applying for: \_\_\_\_\_ Date you can start if hired: \_\_\_\_\_

Type of employment desired: \_\_\_\_\_ Desired salary range / hourly rate: \_\_\_\_\_

Full time / Part time / Temporary / Seasonal

Have you previously applied for employment with this company? \_\_\_\_\_ If yes: \_\_\_\_\_

Yes / No Where / When

If previously employed here, provide the following info? \_\_\_\_\_

Dates of employment / location / reason for separation

If under the age of 18, and if required, can you furnish a work permit? \_\_\_\_\_

yes / if no please explain

Are you legally eligible for employment in this country? \_\_\_\_\_

Yes / No

### Education & Qualifications

	School Name/ Location City / State / Zip	Date Attended # of years	Graduate?	Course of Study / Degree / Major
High School	_____	_____	Yes / No	_____
College	_____	_____	Yes / No	_____
Trade School	_____	_____	Yes / No	_____
Other	_____	_____	Yes / No	_____

Do you have a High School Diploma or GED? \_\_\_\_\_ Foreign Languages \_\_\_\_\_

Yes / No

List all Qualifications / Certifications that you hold which will be helpful in the job for which you are applying?

List all special skills that you feel qualify you for the job for which you are applying. (For example: computer, programming, software, equipment / machinery operation, special tools, installation experience, marketing, etc.)



**Employment History**

Provide the following information of your past three (3) employers or volunteer activities starting with your most recent.

1) \_\_\_\_\_  
 Employer Name \_\_\_\_\_ Address \_\_\_\_\_ Type of Business \_\_\_\_\_  
 ( ) \_\_\_\_\_  
 Company Phone # \_\_\_\_\_ Supervisor \_\_\_\_\_ Supervisors Phone # \_\_\_\_\_ Starting Pay & Ending Pay \_\_\_\_\_  
 / / / / /  
 Employed From Date \_\_\_\_\_ Employed To Date \_\_\_\_\_ How much notice did you give when leaving? If none, explain. \_\_\_\_\_ Job Title or Titles Held \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_ What would your employer say is the reason your employment terminated? \_\_\_\_\_

Please describe your role & responsibilities

May we contact them? \_\_\_\_\_  
 Yes / No \_\_\_\_\_ If no, why not? \_\_\_\_\_ Would they rehire you today? Yes / No \_\_\_\_\_

2) \_\_\_\_\_  
 Employer Name \_\_\_\_\_ Address \_\_\_\_\_ Type of Business \_\_\_\_\_  
 ( ) \_\_\_\_\_  
 Company Phone # \_\_\_\_\_ Supervisor \_\_\_\_\_ Supervisors Phone # \_\_\_\_\_ Starting Pay & Ending Pay \_\_\_\_\_  
 / / / / /  
 Employed From Date \_\_\_\_\_ Employed To Date \_\_\_\_\_ How much notice did you give when leaving? If none, explain. \_\_\_\_\_ Job Title or Titles Held \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_ What would your employer say is the reason your employment terminated? \_\_\_\_\_

Please describe your role & responsibilities

May we contact them? \_\_\_\_\_  
 Yes / No \_\_\_\_\_ If no, why not? \_\_\_\_\_ Would they rehire you today? Yes / No \_\_\_\_\_

3) \_\_\_\_\_  
 Employer Name \_\_\_\_\_ Address \_\_\_\_\_ Type of Business \_\_\_\_\_  
 ( ) \_\_\_\_\_  
 Company Phone # \_\_\_\_\_ Supervisor \_\_\_\_\_ Supervisors Phone # \_\_\_\_\_ Starting Pay & Ending Pay \_\_\_\_\_  
 / / / / /  
 Employed From Date \_\_\_\_\_ Employed To Date \_\_\_\_\_ How much notice did you give when leaving? If none, explain. \_\_\_\_\_ Job Title or Titles Held \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_ What would your employer say is the reason your employment terminated? \_\_\_\_\_

Please describe your role & responsibilities

May we contact them? \_\_\_\_\_  
 Yes / No \_\_\_\_\_ If no, why not? \_\_\_\_\_ Would they rehire you today? Yes / No \_\_\_\_\_

Please explain fully any gaps in your employment that exceed one (1) month. \_\_\_\_\_

Have you ever been terminated, asked to resign or terminated your employment by mutual agreement? \_\_\_\_\_  
 Yes / No

If yes, please explain fully: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_



**Driving History & Background**

I understand that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license for the state in which I reside and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

Applicant will be required to provide a current copy of their driving record and proof of insurance prior to employment.

Drivers license number: \_\_\_\_\_ State that issued your license: \_\_\_\_\_

Do you have more than 2 moving violations in the past 2 years or a DUI in the last 11 years? \_\_\_\_\_  
Yes / No

Have you had a driver's license suspended or revoked in the past in the last 3 years? \_\_\_\_\_  
Yes / No

Have you ever initiated an act of violence in the workplace? \_\_\_\_\_  
Yes / No

Have you ever pled "guilty" or "no contest" to or been convicted of a crime? \_\_\_\_\_  
Yes / No

Have you been arrested and you are currently out on bail or on your own recognizances pending trial? \_\_\_\_\_  
Yes / No

If yes, to any of the previous questions please provide the date(s) and explanation in the space below.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**References**

Please provide the names of three (3) people (not previous employers or relatives) that will say something nice about you.

_____	_____	( )
Name	Relationship	Phone #
_____	_____	( )
Name	Relationship	Phone #
_____	_____	( )
Name	Relationship	Phone #

**Why Should We Hire You**

Feel free to sell yourself to us...  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why are you considering a career change? \_\_\_\_\_  
\_\_\_\_\_

**Military Experience**

Complete this section if you served in the U.S. Armed Services

Branch of service \_\_\_\_\_ Rank at discharge \_\_\_\_\_ Period of active duty \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_ Date of final discharge \_\_\_\_\_ / /

List any special training \_\_\_\_\_  
\_\_\_\_\_

Are you now in the Active Reserves? \_\_\_\_\_  
Yes / No \_\_\_\_\_ If yes, what branch \_\_\_\_\_



### Applicant Statement & Consent

***Your authorization to review criminal history, motor vehicle records, background check, credit history, fingerprint and drug test are granted by signing this application. Legendary Solutions (LS) needs to gather this information in order to comply with our insurance company requirements. If you cancel, omit or lie about any information in this application, you may be disqualified from consideration or terminated from LS.***

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. I hereby release, discharge and hold harmless, to the extent permitted by federal, state and local laws and any party delivering information to the company or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or cause of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability **LS** and its representative for seeking such information and all other persons, corporations or organizations furnishing such information.

When I am employed by **LS**, I agree that if, at any time, I make claims against **LS** for personal injuries, upon written request, I will submit myself to examination by a physician or physicians of the company's selection as often as may be requested.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable federal, state and local law.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration, nor is it intended to convey policy. I understand that no supervision or representative of **LS** is authorized to make any assurances to the contrary and the no implied, oral or written agreements contrary to the forgoing express language are valid unless they are in writing and signed by the President or Vice President of **LS**.

I understand that if I am hired, I will be required to provide proof of identify and legal authority to work in the United States and that federal laws require me to complete an I-9 Form in that regard. I also understand that **LS** only hires legally eligible workers.

I understand that **LS** may have or may establish a drug free workplace or drug and/or alcohol testing program consistent with applicable federal, state and local law. If **LS** has such a program and I am offered a conditional offer of employment, I understand that if pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable, federal, state and local law. I also understand that all employees of the location, pursuant to **LS** policy and federal, state and local law may be subject to urinalysis and/or blood screening or other medically recognized test designed to detect the presence of alcohol or illegal or controlled drugs. If employed, I understand that the taking of alcohol and or drug test is a condition of continual employment and I agree to undergo random alcohol and drug testing consistent with **LS** policy and applicable federal, state and local law.

If employed by **LS**, I understand and agree that **LS**, to the extent permitted by federal, state and local law, may exercise its right, without prior warning or notice to conduct investigations of property (including, but not limited to offices, files, lockers, desks, vehicles, company phones, electronics and computers) and, in certain circumstances, my personal property.

**I UNDERSTAND THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE, ACCURATE AND COMPLETE.**

***I certify that I have read, fully understand and accept all terms of the Applicant Statement & Consent***

I hereby certify that the answers given by me are true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name