APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

Complete the application below and then send to Human Resource by email. In the subject line enter New Applicant. <u>HR@hutchersonvirtualservices.com</u>.

Social Security Number		E-mail Addr	ess		
Last Name		First Name	First Name		
Street or Mailing Address				Apartment No.	
		T-	T		
City		State	Zip Code	County	
To be employed by the Hutchers and pass drug screening (for so These include (but are not limited)	me jobs).	•		, , , , ,	
1. Are you 18 years of age or older?	? 2. Date of Birth		3. Have you been for stealing?	dismissed from a position	
□ Yes □ No		□ Yes □ No			
TYPE OF WORK:					
1st Specific Job Interest		2nd Specific Jo	b Interest		
SOURCE:					
Please indicate how you heard	about this job:				
 □ Agency Website □ Broadcast □ Career Fair □ Direct Mail □ Job Board □ Magazines & Trade Publication □ Newspapers 	☐ It's My Career ☐ Referral ☐ Social Network Service ☐ Talent Exchange ☐ Indeed s ☐ University/Campus Recruiting ☐ Career Builder ☐ Other				

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EDUCATION:								
High School Graduate or Eq	uivalent (GED)?	□Yes	□No					
College/Technical School?								
☐ College ☐ Technical Sch	ıool		Program					
Name of Institution	City/State		Education Level (Achieved)	Major		Hours	Minor	Hours
LICENSES AND CERTIFICAT	ΓΙΟΝS:							
Type of License/Certificate)		License/Certificate N	umber	Expira (Mo/Y	ation r.)	Specialization Endorsemen	on/ nts
			ļ					
	history below beginning ssume to supplement yo	our work hist	current or most recent job tory information.	·.				
Start Date		E	End Date					
Supervisor's Name St		Supervisor's Title						
Supervisor's Phone Number		M	lay We Contact the Sup	pervisor	? 🗆	Yes	□ No	
Achievements								

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Employer	Function
Start Date	End Date
Supervisor's Name	Supervisor's Title
Supervisor's Phone Number	May We Contact the Supervisor? ☐ Yes ☐ No
Achievements	
	Te
Employer	Function
Start Date	End Date
Supervisor's Name	Supervisor's Title
Supervisor's Phone Number	May We Contact the Supervisor? ☐ Yes ☐ No
Achievements	
CERTIFICATION: Read carefully before signing and datin	g. Unsigned applications will not be processed.
for the job is accurate and complete to the best of LLC will verify the information provided. I further	on, resume, and any document enclosed as part of submission my knowledge. I understand that Hutcherson Virtual Services, understand that omitting or providing false information on this ls, will be sufficient reason to disqualify me from consideration uployed.
Signature:	Date:

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EQUAL EMPLOYMENT OPPORTUNITY SELF IDENTIFICATION FORM

Hutcherson Virtual Services provide equal employment opportunity (EEO) to all employees and applicants for employment without regard to race, color, religion, sex, national origin, age, disability, or genetics. In addition to federal law requirements, we complies with applicable state and federal laws governing nondiscrimination in employment.

This applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer leaves of absence, compensation and training.

The information you provide in this section is optional. The information will be used by our agency comply with Federal guidelines for monitoring the equal employment opportunity efforts and for no other reason. Your answers will not be used against you in any way.

Race/Ethnicity	
☐ American Indian or Alaska Native	
□ Asian	
☐ Black or African American	
☐ Hispanic or Latino	
□ Native Hawaiian or Other Pacific Islander	
☐ Two or More Races	
☐ White	
\square I do not wish to provide this information	
Gender	
□ Female	
□ Male	
□ I do not wish to provide this information	
Veteran	
The laws of the State of Georgia afford some degree of preyou believe you belong to any of the categories of veterans please indicate by checking the appropriate box below. DD	
☐ US Armed Forces Veteran ☐	Disabled Veteran (at least 10% disability)
☐ Disabled Veteran's Spouse ☐	Deceased Veteran's Widow/Widower
For Agency Use:	

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