

It is the policy of **RELYON** to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status.

Last Name Firs	st Name	Position Applying For		
Address		City/State/Zip		
Social Security Number	ontact Phone			
Who should be contacted if you are involved				
Name:	_ Relationship to you:	Contact Phone:		
		ent in the United States?YesNo		
If you were offered employment, when would	ld you be available to begin work?			
How will you get to work?	Driver's License Number	State?		
Have you had any moving violations within	the last seven years? Yes	No		
If yes, please describe	-			
Are you able to perform the essential functi	ons of the job position? Yes	No		
If NO, please describe reasons why:		 :		
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Note: We comply with ADA and consider reasona		be necessary for eligible applicants/employees to		
Note: We comply with ADA and consider reasona perform essential functions. Hire may be subject	to passing a medical examination, and to	skill and agility tests.		
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certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences immediate termination. I authorize the provided and the providing false or misleading mornance in the providing false or misleading mornance in the provided of the provided provided that if employed, my employment will not be for any fixed period of time an may be terminated by me or the company at any indicestand that if employed, my employment will not be for any fixed period of time an may be terminated by me or the company at any indicestand that if a qualified as they become available. I also understand my failure to report to work will indicate I have quit. It gives to succept to different to drug/alcohol screens as specified in the EBLYON substance abuse policy. HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND UNDERSTAND AND AGREE TO ITS TERMS. **RELEASE OF CRIMINAL RECORDS** Applicant's Signature Date **RELEASE OF CRIMINAL RECORDS** The undersigned, do hereby authorize RELYON to examine any felony conviction on file in the counties in the State of California or any other states. In doing so, I understand that I am waiving my right of confidentiality concerning my criminal history. Take you ever been convicted of a criminal offense (felony or serious misdemeanor)? (Conviction for Marijuana-related offenses that armore than two years old need not be listed.)YesNo for serious misdemeanor? (Conviction for Marijuana-related offenses that armore than two years old need not be listed.)YesNo for serious misdemeanor? (Conviction for Marijuana-related offenses that armore than two years old need not be listed.)YesNo for years with the case:	College Name				-	
information will be the basis for rejection of my application, or if employment commences immediate termination, authorize tersons designated to contact former employers and educational organizations regarding my employment and education. I authorize the tersons designated as references to fully and freely communicate information regarding my previous employment and education. I understand that if employed, my employment will not be for any fixed period of time an may be terminated by me or the company at any mine. I also understand and agree that I may be expected to work on a wide variety of jobs assignments in the area and agree to accept salignments for which I am qualified as they become available. I also understand my failure to report to work will indicate I have quit. It gives to submit to drug/alcohol screens as specified in the RELYON substance abuse policy. HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND UNDERSTAND AND AGREE TO ITS TERMS. RELEASE OF CRIMINAL RECORDS The undersigned, do hereby authorize RELYON to examine any felony conviction on file in the counties in the State of California or any their states. In doing so, I understand that I am waiving my right of confidentiality concerning my criminal history, lave you ever been convicted of a criminal offense (felony or serious misdemeanor)? (Conviction for Marijuana-related offenses that are note than two years old need not be listed.)YesNo fixes, state nature of the crime(s), when and where convicted and disposition of the case:		Did you receive a degree	?YesNC	i i yes, degree rece	ervea:	
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