PRE-EMPLOYMENT APPLICATION FORM

As part of the application process, Employer Flexible HR, LLC may conduct background checks on employees. You will be asked to complete a Background Authorization form for this purpose. Initial your understanding of this statement.. _____

Mend Services is an Equal Opportunity Employer. It is our policy to abide by all federal, state, and local laws prohibiting employment discrimination based solely on a person's race, color, religious creed, sex, national origin, ancestry, citizenship status, pregnancy, physical disability, mental disability, age, military status or status as a Vietnam-era or special disabled veteran, marital status, registered domestic partner status, gender (including sex stereotyping), medical condition (including, but not limited to, cancer related or HIV/AIDS related), sexual orientation, or any other protected status except where a reasonable bona fide occupational qualification exists.

General Information (Please Print):

Application Date:		Date Available To Work:			Position Applied For:	
Last Name:	First Name:		Middle:		Desired Wage:	
Desired Work Type: ☐ Full Time ☐ Shift 1	☐ Part Time ☐ Shift 2	☐ Temporary ☐ Shift 3	If Part Time, Specify Availability:			
Current Address:	Street	Apt#	City	State	Zip	How Long At Current Address
Previous Address:	Street	Apt#	City	State	Zip	How Long At Previous Address
Primary Phone Number:		Secondary Phone Number:			Email:	
Are you capable of performing the essential duties of the position you are being hired or interviewed for, with or without reasonable accommodation? ☐ Yes or ☐ No						
Can you, after employment, submit verification of your legal right to work in the United States? ☐ Yes ☐ No						
Have you previously held employment with Mend Services? ☐ Yes ☐ No If yes, give dates: From: To:						

Education and Training

School Name	City,State	Degree/Diploma Major Course of Study	Degree Received?
High School / GED			
College			
Graduate School			
Trade School			
List any other education, training, special skills, certificates, or licenses that you possess related to the position.			
List any machines, equipment, or software on which you are qualified and experienced in operating:			

Record of Previous Employment

Please list the names of your present employers in chronological order with present or last employer listed first. Be sure to account for all periods of time including military service and any period of unemployment. If self-employed, give firm name and supply business references. (Add additional page(s) if necessary.

Present or Last Employer	Employed From (mo/yr)	Pay Start $	Your Title or Position:	Exact Reason for Leaving
Address				
City, ST, Zip	To (mo/yr)	Final $	Description of Duties:	May we contact this employer? Supervisor's Name and Title:
Telephone				

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City, ST, Zip	To (mo/yr)	Final $	Description of Duties:	May we contact this employer? Supervisor's Name and Title:
Telephone				

EMPLOYMENT GAPS: _____

APPLICANT'S CERTIFICATION & AGREEMENT

I hereby certify that the facts set forth in the above employment application (and resume if included) are true and complete to the best of my knowledge and that if I am hired, falsified statements of any kind or omissions of facts called for on this application (and resume if attached) shall be considered sufficient basis for dismissal.

I fully authorize all persons listed above (and within my resume if included) to give Mend Services and their client any and all information requested to verify their accuracy and to obtain reference information on my work performance. I hereby release Mend Services from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules, and regulations of employment of Employer Flexible HR, Inc. and their client. However, I further understand that neither the policies, rules, regulations of employment, nor anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

I understand that Mend Services and their client have agreed that Mend Services will provide workers' compensation insurance coverage for its employees. The client may elect to maintain their own workers' compensation policy in which their employees are covered. In the event of an injury in the workplace, I agree that my sole remedy lies in coverage under Mend Services' workers' compensation insurance policy.

I understand and agree that, subject to applicable law, I may be required to take a drug and alcohol screening test. I hereby give my voluntary consent for a urine and/or blood sample to be collected from me and submitted for testing. I also consent to the release of the test results to Mend Services and/or their client company. I understand that any positive drug or alcohol result may preclude my employment.

Applicant Signature: _____ Date: _____

Applicant Name (Printed): _____