

PLEASE PRINT ALL
INFORMATION REQUESTED
EXCEPT SIGNATURE



APPLICATION FOR EMPLOYMENT

ACT is an equal opportunity employer, we consider applicants for all positions without regard to race, color, religion, sex national origin, age, disability, or veteran status, or any other legally protected status.

PLEASE COMPLETE PAGES 1-6. DATE _____

Name _____
Last First Middle Maiden

Present address _____
Number Street City State Zip

Telephone (____) _____ Social Security No. _____ - _____ - _____

Referred by _____

If under 18, please list age _____ Do you have legal right to work in USA? No Yes

Position applied for _____ Salary desired _____

Employment desired FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME

When available for work? _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

Work Experience Please list your work experience beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

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May we contact your present employer? Yes No

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Please list two references other than relatives or previous employers.

Name _____

Name _____

Position _____

Position _____

Company _____

Company _____

Address _____

Address _____

Telephone () _____

Telephone () _____

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.

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The information provided in this Application for Employment is true, correct, and complete. If employed, any misstatement or any omission of fact on this application may result in my dismissal.

I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future. I understand and agree that, if hired, my employment will be for no definite period and may, regardless of the date of payment of wages, be terminated at any time without previous notice and with or without reason, at the will of either myself or ACT.

I hereby authorize all corporations, companies, credit agencies, schools, government agencies, persons, military services, and former employers to release information they may have about me to Advance Conversion Technology or its agents and employees, and release all persons or companies from any liability or responsibility from doing so. Further, I authorize the procurement of a consumer report and credit check, and understand that such a report may contain information about my background, character, and personal reputation. I understand that this notice will also apply to any future update reports that may be requested.

Applicant's Signature

Applicant's Printed Name

Date

Affirmative Action Program Applicant Information Form

Advanced Conversion Technology, Inc. is an Equal Opportunity Employer. As required by law, we must record certain information to be made a part of our Affirmative Action Program.

Applicants for employment are also invited to participate in the Affirmative Action Program by reporting their status as a veteran. In extending this invitation you are also advised that: (a) workers (applicants) are under no obligation to respond, but may do so in the future if they choose; (b) responses will remain confidential within the Human Resources Department; and (c) responses will be used only for the necessary information to include in our Affirmative Action Program. We are a company that values diversity. We actively encourage women and minorities to apply. Refusal to provide this information will have no bearing on your application and will not subject you to any adverse treatment. Please complete the information requested below. Thank you for your cooperation.

Section 1: General Applicant Information

Name	Date
	____/____/____
Position applied for	

Section 2: Please check all that apply (See next page for definitions)

Race or Ethnic Identity	Gender	Veteran Status
<input type="checkbox"/> Hispanic or Latino	<input type="checkbox"/> Male	<input type="checkbox"/> Veteran
<input type="checkbox"/> White (not Hispanic or Latino)	<input type="checkbox"/> Female	<input type="checkbox"/> Not a veteran
<input type="checkbox"/> Black or African American (not Hispanic or Latino)		
<input type="checkbox"/> Native Hawaiian or Pacific Islander (not Hispanic or Latino)		
<input type="checkbox"/> Asian (not Hispanic or Latino)		
<input type="checkbox"/> American Indian or Alaskan Native (not Hispanic or Latino)		
<input type="checkbox"/> Two or More Races (not Hispanic or Latino)		
<input type="checkbox"/> I do not wish to Self-Identify		
Signature _____		
How did you hear of our opening?		
<input type="checkbox"/> Current Employee <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Recruiter <input type="checkbox"/> Other - Explain:		
<i>For Human Resources Use Only:</i>		
Requisition #	Job Group	

Race and ethnic designations as used by the Equal Employment Opportunity Commission do not denote scientific definitions of anthropological origins. Definitions of the race and ethnicity categories are as follows:

Hispanic or Latino - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

White (Not Hispanic or Latino) - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American (Not Hispanic or Latino) - A person having origins in any of the black racial groups of Africa.

Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) - A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Asian (Not Hispanic or Latino) - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

American Indian or Alaska Native (Not Hispanic or Latino) - A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

Two or More Races (Not Hispanic or Latino) - All persons who identify with more than one of the above five races

(a) *Veteran* means a person who has been discharged or released from active duty in the armed forces under honorable conditions performed—

- (1) In a war; or,
- (2) In a campaign or expedition for which a campaign badge has been authorized; or
- (3) During the period beginning April 28, 1952, and ending July 1, 1955; or
- (4) For more than 180 consecutive days, other than for training, any part of which occurred during the period beginning February 1, 1955, and ending October 14, 1976; or
- (5) During the period beginning August 2, 1990, and ending January 2, 1992; or
- (6) For more than 180 consecutive days, other than for training, any part of which occurred during the period beginning September 11, 2001, and ending on the date prescribed by Presidential proclamation or by law as the last day of Operation Iraqi Freedom.

(b) *Disabled Veteran* means a person who has been discharged or released from active duty in the armed forces under honorable conditions performed at any time and who has established the present existence of a service-connected disability or is receiving compensation, disability retirement benefits, or pension because of a statute administered by the Department of Veterans Affairs or a military department.

A website maintained by the U.S. Office of Personnel Management, according to official publications, will be updated periodically to reflect any changes. The address of that website appears below. <http://www.opm.gov/veterans/html/vetguide.asp>.

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