

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

Advance Conversion Technology/Techkor 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 handicapped, disabled veteran, veteran of the Vietnam era or other minority. 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 (4) all that apply (See reverse for definitions)

Race or Ethnic Identity				
Hispanic or Latino White (not Hispanic or Latino) Black or African American (not Hispanic or Latino) Native Hawaiian or Pacific Islander (not Hispanic or Latino) Asian (not Hispanic or Latino) American Indian or Alaskan Native (not Hispanic or Latino) Two or More Races (not Hispanic or Latino)	Gender Male Female	Veteran Status Vietnam Era Veteran Special Disabled Veteran Other Eligible Veteran		
I do not wish to Self-Identify				
Signature _____			**Other Individual with Disabilities	
How did you hear of our opening?				
Current Employee Newspaper Ad Recruiter Other - Explain Below:				
For Human Resources Use Only:				
	<i>Requisition #</i>		<i>Job Group</i>	