



APPLICANT INFORMATION

				Today's Date	
Last Name		First		M.I.	Maiden
Street Address			City		State
Years at current residence			Phone () -		
E-mail Address					
Social Security No. - -			Date of Birth \ \		
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	
				YES <input type="checkbox"/> NO <input type="checkbox"/>	
Do you have a Driver's License?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	What is your means of transportation to work?	
License Number		State of Issue		<input type="checkbox"/> Operator <input type="checkbox"/> Commercial (CDL)	
Any accidents during the past three years?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, how many?	
Any moving violations in the past three years?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, how many?	

Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain
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Position Applied for	Desired Salary \$	Date Available
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
	If so, when?	
Availability to Interview:	By Phone	In Person

EDUCATION

High School					
Name			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College					
Name			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Business or Trade School					
Name			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Professional School					
Name			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

PREVIOUS EMPLOYMENT

Please list your work experience for the past five (5) years beginning with your most recent/current job. If you are/were self-employed, please give your company/firm name. Attach additional sheets if necessary.

Company		Phone () -	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company:			
From	To	Reason for Leaving (be specific)	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone () -	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company:			
From	To	Reason for Leaving (be specific)	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone () -	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company:			
From	To	Reason for Leaving (be specific)	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

REFERENCES - PLEASE LIST TWO (NON-RELATIVE) REFERENCES

Full Name	Relationship
Company	Phone () -
Address	
Full Name	Relationship
Company	Phone () -
Address	

MILITARY SERVICEHave you ever been in the Armed Forces? YES NO

Branch From To

Rank at Discharge Type of Discharge

If other than honorable, explain

Are you currently a member of the National Guard? YES NO **AGREEMENT – PLEASE READ CAREFULLY BEFORE SIGNING**

I certify that all the information on this application is accurate and complete to the best of my knowledge and understand that misleading or false statements will constitute sufficient cause for refusal of hire or termination of my employment.

I understand that neither the acceptance of this application nor the subsequent entry into any type of employment relationship with OnPoint Network LLC creates an actual or implied contract of employment. I understand that, if I accept employment with OnPoint Network LLC, it will be on an at-will basis. This means that either OnPoint Network LLC or I have the right to terminate the employment relationship at any time, for any reason, with or without cause.

I agree to submit to drug and alcohol testing, if requested by OnPoint Network LLC. I release OnPoint Network LLC, and its employees, plus other persons or companies, from any and all liability arising out of or related in any way to such testing.

I authorize OnPoint Network LLC to investigate information concerning my education, employment experiences and all other aspects of my background relevant to my proposed employment. I release OnPoint Network LLC and its employees from all liability arising from such investigation.

Did you complete this application yourself? YES NO If no, who did?

Signature Date

OnPoint Network LLC is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with OnPoint Network LLC depends solely on your qualifications.