

Diversified Industrial Staffing

Application For Employment

Please Print Clearly

The Company, its affiliate corporations and clients (the "Co-Employers"), promote and afford equal treatment and service to all employees and assures that all employees and applicants for employment are given an equal opportunity without regard to race, religion, color, national origin, age, sex, marital status, height, weight, or the presence of any sensory, mental or physical disability unless such disability effectively prevents the performance of the essential functions and duties required of the position and cannot be reasonably accommodated without undue hardship to the employer. The Co-Employers will operate within the principles of "Equal Opportunity" guidelines set forth in federal, state and local laws and regulations. All activities relating to employment including recruitment, testing, selection, promotion, training, and termination will be conducted in a nondiscriminatory manner. The Co-Employers will cooperate fully with all organizations and commissions that are established and organized to promote Equal Employment Opportunity.

EMPLOYER PORTION: Client Name: _____
Employee's Job Title: _____ Worker's Comp Code: _____
Client Start Date ____/____/____ First Check Date ____/____/____
Employee will work: ____ Full Time ____ Part Time
Pay information: Hourly or Salary: _____ per ____ Hour ____ Other ____
Authorizing Signature: _____ Date: _____

Applicant/Employee Portion

First Name MI Last Name

Address City State Zip Code

Phone Number: _____ - _____ - _____ Today's Date ____/____/____

Driver's License Number: _____ State: _____ Expiration Date: _____

Previous Address: _____

Have you ever been employed by us before? yes no If yes, give dates and name of company _____

Have you ever been convicted of a crime or are there any felony charges pending against you? yes no If yes, give date(s), place and nature of conviction (a conviction does not constitute an automatic bar from employment) _____

Position applying for: _____ Date available: _____ Salary Requested: _____

Can you perform the essential duties required of the position for which you are applying, with or without accommodation? yes no

Individual to notify in case of an emergency: _____ Phone: _____

Are you 18 years or older? yes no

Education and Training

Education	Name & Location of School	Courses Taken	# of years completed	Did you Graduate?
High School				
College/Trade School				
Other				

Employment Experience

Please give a complete list of your employment record, beginning with your most recent employment. Include any U.S. Military service.

Company Name, Address & Phone Number	Dates Employed	Ending Salary	Job Title and Duties	Reason for Leaving
	Month/Yr From: ___/___ To: ___/___			
	Month/Yr From: ___/___ To: ___/___			
	Month/Yr From: ___/___ To: ___/___			
	Month/Yr From: ___/___ To: ___/___			

Read Before Signing

The term "Confidential Information" means all information belonging to the Co-Employers related to internal operations, procedures and policies, business strategies, pricing, billing information, personnel, customer contacts, sales information, employee lists, technology, software source codes, programs, costs, marketing plans, development plans, computer programs and systems, security systems, and all other plans, proprietary information and trade secrets of every kind and character. Confidential Information has been and/or will be disclosed to me. These disclosures are made solely to assist me in the performance of my responsibilities. My right to use Confidential Information, and the extent thereof, is at the Company's sole discretion and such rights shall expire immediately upon the termination of my employment. I shall not, either during or after my employment with the Company, disclose any Confidential Information for any reason or purpose contrary to the interest of the Company or the client to which I am assigned. Upon termination of employment, I shall immediately return all property in my possession relating to the Co-Employers business.

It is our policy to maintain a workplace that is free from the effects of both legal and illegal drug and/or alcohol abuse. We may conduct drug testing of job applicants and employees. Should we offer you a position for employment, you may be contacted regarding a drug test. Refusal to take, altering the results of or failing the drug test will disqualify you from further consideration or continuation of employment. I also acknowledge that, if hired, I may be required to submit to medical/physical examinations which is consistent with business necessity, at the Co-Employers expense.

It is agreed that arbitration shall be the sole mechanism for bringing a legal claim against the Co-Employers for matters relating to employment, discipline and/or termination. Arbitration must be commenced within one year of the date the claim arises. If any portion of the Agreement is determined to be unenforceable or invalid, this Agreement shall remain in full force and effect to the fullest extent allowable by law.

I hereby acknowledge that the statements and answers to the above questions are complete and true to the best of my knowledge. I acknowledge that any false statement or omission in answering the above questions may result in the rejection of my application or can result in immediate discharge and/or termination of employment. I hereby release the Company, previous employers, references and all persons contacted from any and all liability for damage incurred while verifying the accuracy of the information provided. In consideration of my employment, I agree to abide by all Co-Employers rules and regulations. I acknowledge that, if employed, unless my employment becomes subject to a collective bargaining agreement, my employment and compensation will be at the will of the Company and can be terminated, with or without cause, and with or without notice, at any time, at the option of either the Company or myself. I further agree that only the President of Diversified Industrial Staffing, has now or has had in the past, authority to enter into any agreement for employment for any specified period of time or to make any agreement which is contrary to or a modification of the employment-at-will relationship, and that such agreement or representation must be in writing and signed by both myself and the President of Diversified Industrial Staffing in order to be effective.

I agree that any action or suit against the Co-Employers arising out of me employment or termination of employment, including but not limited to claims arising under State or Federal civil rights statutes, must be brought within 180 days of the event giving rise to the claims or be forever barred, unless a shorter period is established by statute. I waive any limitations periods to the contrary. This constitutes the entire agreement between the Co-Employers and myself.

Applicant's Signature: _____ Date: _____