



**Travis Pruitt & Associates, Inc.**  
**Application for Employment**

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Driver's License #: \_\_\_\_\_

Position(s) applied for: \_\_\_\_\_

Type of employment desired: \_\_\_\_\_ Full-Time \_\_\_\_\_ Part-Time \_\_\_\_\_ Temporary

Date Available to start work: \_\_\_\_\_

How were you referred to us? \_\_\_\_\_

Are you able to meet the attendance requirements? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you have any objection to working overtime (if necessary)? \_\_\_\_\_ Yes \_\_\_\_\_ No

Can you travel if required by this position? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you been previously employed by our organization? \_\_\_\_\_ Yes \_\_\_\_\_ No

Can you submit proof of legal employment authorization? \_\_\_\_\_ Yes \_\_\_\_\_ No

If under 18, can you furnish a work permit if it is required? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you been convicted of a crime in the last 7 years? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain (a conviction will not automatically bar employment): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Employment History

Please provide all employment information for your past four employers starting with the most recent.

|  |                      |
|--|----------------------|
| Employer: _____                                  | Position held: _____ |
| Address: _____                                   | Phone # _____        |
| Immediate supervisor and title: _____            |                      |
| Dates employed: from _____ to _____ Salary _____ |                      |
| Job summary: _____                               |                      |
| Reason for leaving: _____                        |                      |

|  |                      |
|--|----------------------|
| Employer: _____                                  | Position held: _____ |
| Address: _____                                   | Phone # _____        |
| Immediate supervisor and title: _____            |                      |
| Dates employed: from _____ to _____ Salary _____ |                      |
| Job summary: _____                               |                      |
| Reason for leaving: _____                        |                      |

|  |                      |
|--|----------------------|
| Employer: _____                                  | Position held: _____ |
| Address: _____                                   | Phone # _____        |
| Immediate supervisor and title: _____            |                      |
| Dates employed: from _____ to _____ Salary _____ |                      |
| Job summary: _____                               |                      |
| Reason for leaving: _____                        |                      |

|  |                      |
|--|----------------------|
| Employer: _____                                  | Position held: _____ |
| Address: _____                                   | Phone # _____        |
| Immediate supervisor and title: _____            |                      |
| Dates employed: from _____ to _____ Salary _____ |                      |
| Job summary: _____                               |                      |
| Reason for leaving: _____                        |                      |

### **Other Skills and Qualification**

Summarize any job-related training, skills, licenses, certificates, software experience:

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### **Educational History**

List school name and location, years completed, course of study, and any degrees earned:

High School: \_\_\_\_\_

College: \_\_\_\_\_

Technical Training: \_\_\_\_\_

Other: \_\_\_\_\_

### **References**

List three (3) reference names, phone numbers, and years known (do not include relatives)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_



## **Travis Pruitt & Associates, Inc.**

### **Applicant Authorization of Verification**

I hereby authorize the potential employer to contact, obtain and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I hereby release from liability the potential employer and its representatives for seeking, gathering and using such information to make employment decisions and all other persons or organizations for providing such information. I also hereby agree to undergo a background check if necessary.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either I or the employer can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three (3) days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I declare that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_



## **Travis Pruitt & Associates, Inc**

### **Pre-Employment Drug Testing Consent and Release Form**

I hereby consent to submit to urinalysis and/or other tests as shall be determined by Travis Pruitt and Associates, Inc. in the selection process of applicants for employment, for the purpose of determining the drug content thereof.

I agree that Quest Diagnostics may collect these specimens for these tests and may test them or forward them to a testing laboratory designated by the Company for analysis.

I further agree to and hereby authorize the release of the results of said tests to the Company.

I understand that it is the current use of illegal drugs that would prohibit me from being employed at this Company.

I further agree to hold harmless the Company and its agents (including the above named physician or clinic) from any liability arising in whole or part, out of the collections of specimens, testing, and use of the information from said testing in connection with the Company's consideration of my application of employment.

I further agree that a reproduced copy of this pre-employment consent and release form shall have the same force and effect as the original

I have carefully read the foregoing and fully understand its contents. I acknowledge that my signing of this consent and release form is a voluntary act on my part and that I have not been coerced into signing this document by anyone.

#### **Applicant:**

Print Name: \_\_\_\_\_ Social Security # \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### **Witness:**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_