



**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

Are you authorized to work in the US for any employer? _____ Yes _____ No

If you currently hold a sponsored work visa, when does your visa expire? _____

Is your work visa transferable to any employer? _____

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

Have you been convicted of a felony in the last 7 years? _____ Yes _____ No

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

If any of the information requested below is on your resume you are not required to fill it out.

Other Skills and Qualification

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

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 and 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: _____

Signature: _____ Date: _____