



After 3 ASP Employment Application

Our company (After 3) fully subscribes to the principles of Equal Employment Opportunity. It is our policy to provide employment, compensation, and other benefits related to employment based on qualifications without regard to race, color, religion, national origin, age, sex, veteran status, genetic information, disability, or any other basis prohibited by federal, state or local law. In accordance with requirements of the Americans with Disabilities Act and applicable federal, state and/or local laws, it is our policy to provide reasonable accommodation upon request during the application process to applicants in order that they may be given a full and fair opportunity to be considered for employment. AS an Equal Opportunity Employer, we intend to comply fully with applicable federal, state and/or local employment laws and the information requested on this application will only be used for purposes consistent with those laws. To the extent required by applicable law, After 3 maintains a smoke-free workplace.

Position Applied For:		Date:	
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Salary Expectations:	
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Full Legal Name:			
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Last:		Middle:		First:	
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Street Address:		Apt #:	
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City:		State:		Zip Code:	
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Cell Phone:	
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Other Phone:	
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Email Address:	
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If you are under 18 years of age, please specify your age: _____ (This information will be used only for child labor law purposes).

Are there any days, shifts, or hours you will not work? ___ YES ___ NO

If yes, please explain:

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Are you willing to work past close if necessary? ___ YES ___ NO

*NOTE: It is not necessary for you to identify unavailability for work because of religious observance or practice or any other protected classification. Subsequent to any job offer, we will consider whether a reasonable accommodation can be made.

How did you learn about After 3? _____

Have you ever applied or worked for After 3 before? _____ YES _____ NO

If yes,
provide
dates:

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Are you legally authorized to work in the United States? _____ YES _____ NO

Will you now or in the future require sponsorship for employment visa status (e.g., H-1B visa status)? _____ YES _____ NO

*NOTE: The Federal Immigration and Reform and Control Act of 1986 requires that a DHS Employment Eligibility Verification "Form I-9" be completed for every new hire and that within 3 business days of beginning work every new hire must present to the employer documentation establishing his/her identity and authorization to work. This federal requirement must be satisfied as a condition of employment.

Education							
Describe any educational degrees, skills, training or experience you believe are relevant to the job applied for.							
Name, City and State of Educational Institution	Graduated		If no, Degree Credits Earned	Type of Degree Received or Expected	Major	Minor	Grade Point / Overall GPA
	YES	NO					
High School							
College/University							
Technical/GED							
Licenses/Certifications							
Other							

Please list any trainings, certifications, volunteer work or experience you believe are relevant to the job you applied for:

Employment History

Please complete for all full-time and/or part-time employment beginning with MOST RECENT employer. You may include as part of your employment history any verified work performance on a volunteer basis. All applicants should start with their most recent job, include military assignments and voluntary employment and provide ten (10) years of history. (A separate sheet may be attached.) You must explain any gaps in your employment history.

Company Name:		Phone:							
Address:									
Supervisor:			May we contact?		YES		NO		
Dates Employed:	From:		To:		Rate of Pay:	Start:		Last:	
State job titles and describe job duties:									
Reason for leaving:									
Company Name:		Phone:							
Address:									
Supervisor:			May we contact?		YES		NO		
Dates Employed:	From:		To:		Rate of Pay:	Start:		Last:	
State job titles and describe job duties:									
Reason for leaving:									
Company Name:		Phone:							
Address:									
Supervisor:			May we contact?		YES		NO		
Dates Employed:	From:		To:		Rate of Pay:	Start:		Last:	
State job titles and describe job duties:									
Reason for leaving:									
Company Name:		Phone:							
Address:									
Supervisor:			May we contact?		YES		NO		
Dates Employed:	From:		To:		Rate of Pay:	Start:		Last:	
State job titles and describe job duties:									
Reason for leaving:									

Have you ever been discharged or asked to resign from employment? _____ YES _____ NO

If yes, explain:

Did you receive any discipline in your last 12 months of active employment with your previous employer? _____ YES _____ NO

If yes, explain:

Were you given a performance evaluation within the last 12 months of active employment? _____ YES _____ NO

If yes, what was the range of scores used and what was your score?

Have you signed any non-competition or non-solicitation agreement or any other kind of agreement with any other employer that might restrict you from working for the Company (you will be required to furnish a copy of the agreement if you are being considered for hire)? _____ YES _____ NO

If yes, please explain:

Professional References			
Please list three individuals unrelated to you with whom you have worked who know your qualifications for this position			
Name	Address	Phone	Relationship

Military
Complete only if you served in the military.

Branch of Service: _____ Number of Years/Months of Service: _____

Rank at Discharge: _____ Date of Discharge: _____

Describe any military skills, training or experience you believe are relevant to the job you applied for:

Applicant's Acknowledgement

I certify that the answers given herein and during the entire application process (including but not limited to any criminal record inquires made following this application, resumes, attachments to this application, interviews or otherwise (if applicable) are true and complete to the best of my knowledge. I understand that any misrepresentations, omissions of facts during the application process may be cause for my dismissal at any time without prior notice.

I connect to and authorize the Company to contact my former employers, references and all other persons and organizations for information bearing upon my qualifications for employment. I further authorize the listed employers, schools and personal references to give the Company (without further notice to me) any and all information about my previous employment and education, along with any other pertinent information they may have and hereby waive any actions which I may have against either party(ies) for providing a good faith reference.

I EXPRESSLY AGREE AND UNDERSTAND THAT, IF EMPLOYED, MY EMPLOYMENT IS NOT FOR A SPECIFIC TERM, IS BASED ON MUTUAL CONSENT AND MAY BE TERMINATED BY ME OR THE COMPANY WITH OR WITHOUT NOTICE OR CAUSE AT ANY TIME. I FURTHER UNDERSTAND THAT NO ORAL PROMISE, EMPLOYER POLICY, CUSTOM BUSINESS PRACTICE OR OTHER PROCEDURE (INCLUDING PERSONNEL HANDBOOK OR ANY PERSONNEL MANUALS) CONSTITUTE AN EMPLOYMENT CONTRACT OR MODIFICATION OF THE AT-WILL EMPLOYMENT RELATIONSHIP BETWEEN ME AND THE COMPANY. I ALSO UNDERSTAND THAT MY AT-WILL EMPLOYMENT STATUS WITH THE COMPANY MAY ONLY BE ALTERED IN AN INDIVIDUAL CASE OR GENERALLY IN A WRITING SIGNED BY THE OWNER, PRESIDENT OR CEO OF THE COMPANY.

I understand I may be required to qualify for employment based on additional employment criteria. For example, I may be required to take job-related tests; submit to a background investigation or take a pre-employment drug test. If I am offered employment or start work before any required tests is complete, I understand that my employment is contingent on a satisfactory result on all required tests. I authorize the release of any background check results and of any drug/alcohol test to any state or federal authority requesting such information and in response to a valid subpoena or other legal document. I agree to sign any additional forms necessary for pre-employment checks and/or tests to be conducted.

Signature: _____ Date: _____