

Application For Co-Employment

EOE Disclaimer: IES is an equal opportunity employer. We are committed to providing equal employment opportunities to all applicants without regard to race, color, religion, sex, national origin, marital status, citizenship status, age, sexual orientation, disability or veteran status. Employment decisions are made without consideration of these or any other factors that are prohibited by law.

Employee Name: _____

Social Security No: _____ **Date of Birth:** _____

Current Address: _____
Street City State Zip

Phone Number: _____ **Email Address:** _____

Position(s) Applying For : _____ **Date Available to Start:** _____

Seeking:

- Full Time Part Time
 Temporary Seasonal/On-Call

If part time, specify your available hours by day:

Sun	Mon	Tue	Wed
Thu	Fri	Sat	

Shifts You Are Available To Work: 1st Shift 2nd Shift 3rd Shift Rotating Shifts

Are You Available To Work Overtime? Yes No

Do You Have a Legal Right To Work In the U.S.? Yes No

If Required, Do You Have a Valid Driver's License? Yes No

If Under 18, Can You Furnish a Work Permit? Yes No

Have You Ever Worked With Us Before? Yes* No

***If Yes, List Position/Dates/Location:** _____

Relatives/Friends Working With Us: _____

Who Referred You To This Opening?: _____

Have You Ever Been Convicted of a Felony? Yes* No

***If Yes, Please Explain:** _____
(This will not automatically bar you from employment)

Have You Ever Been Bonded? Yes No

Education

	Name/City/State	Major	Did You Graduate? <small>If No, List Years or Credits Completed</small>	List Degree/Certificate
High School				
College				
Other				



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Employment History

List Employment Experience Beginning With Most Recent Employer (Including Military History)

Dates (Mo/Yr)		Employer (Name, Address, Phone)	Pay Rate		Reason For Leaving
From	To		Begin	End	

Job Title: _____ Supervisor (Name/Title): _____

Brief Description of Job Duties: _____

Dates (Mo/Yr)		Employer (Name, Address, Phone)	Pay Rate		Reason For Leaving
From	To		Begin	End	

Job Title: _____ Supervisor (Name/Title): _____

Brief Description of Job Duties: _____

Dates (Mo/Yr)		Employer (Name, Address, Phone)	Pay Rate		Reason For Leaving
From	To		Begin	End	

Job Title: _____ Supervisor (Name/Title): _____

Brief Description of Job Duties: _____

Additional Information, Skills, Comments

Emergency Contact

Name: _____ Day Phone: _____
Relationship: _____ Evening Phone: _____

Applicant Statement: I certify that the information provided by me on this application is true and complete to the best of my knowledge. I understand that any material omission or false/misleading statements can result in the termination of my employment. I give IES and my worksite employer, their agents and assigns, the right to contact and obtain information from references, employers, educational institutions and to other otherwise verify the accuracy of the information provided in this application. I hereby release from all liability IES or my worksite employer, their agents and assigns, for seeking, gathering, and using such information. I also release from all liability all persons, corporations or organizations for furnishing such information. Unless I am a contractual employee, I understand that I am an at-will employee and am free to resign at any time and IES or my worksite employer, their agent or assign, is free to terminate my employment at any time with or without reason or notice. This application does not constitute an agreement or contract for employment for any specified period or duration. I understand that no representatives of IES or my worksite employer, other than an authorized officer, has the authority to make any assurances to the contrary.

Applicant's Signature: _____ Date: _____



Professional References

Please list the names and contact information for three (3) professional references

List only current or previous **supervisors**.

Name: _____
Company: _____
Relationship: _____
Phone Number: _____
Secondary Phone Number: _____
Email Address: _____
Job Title of Reference *while* supervising you: _____

Name: _____
Company: _____
Relationship: _____
Phone Number: _____
Secondary Phone Number: _____
Email Address: _____
Job Title of Reference *while* supervising you: _____

Name: _____
Company: _____
Relationship: _____
Phone Number: _____
Secondary Phone Number: _____
Email Address: _____
Job Title of Reference *while* supervising you: _____