

"NOTICE TO APPLICANTS"

Background Check: Randall Brothers, LLC conducts background checks on all candidates post-job offer. We may also use a third party administrator to conduct the background check. The type of information that may be collected is as follows: criminal background check, employment history, education, credit and professional or personal references.

Pre-employment Drug Screening: Prospective employees will be administered various tests for the use of drugs as part of their pre-employment screening process. Positive test results will result in disqualifications.

To Submit Applications: All fields in **RED**, must be completed.

APPLICANT INFORMATION									
Last Name			First			M.I.		Date	
Street Address						Apartment/Unit #			
City			State			ZIP			
Phone			E-mail Address						
Date Available		Social Security No.				Desired Salary			
Position Applied for						Are you 18 years of age or older? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Are you a citizen of the United States?		YES <input type="checkbox"/> NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?		YES <input type="checkbox"/> NO <input type="checkbox"/>			
Have you ever worked for this company?		YES <input type="checkbox"/> NO <input type="checkbox"/>		If so, when?					
Have you ever been convicted of a felony?		YES <input type="checkbox"/> NO <input type="checkbox"/>		If yes, explain					
EDUCATION									
High School			Address						
From		To		Did you graduate?		YES <input type="checkbox"/> NO <input type="checkbox"/>		Degree	
College			Address						
From		To		Did you graduate?		YES <input type="checkbox"/> NO <input type="checkbox"/>		Degree	
Other			Address						
From		To		Did you graduate?		YES <input type="checkbox"/> NO <input type="checkbox"/>		Degree	
REFERENCES									
<i>Please list three professional references.</i>									
Full Name			Relationship						
Address			Phone ()			Years Acquainted:			
Full Name			Relationship						
Address			Phone ()			Years Acquainted:			
Full Name			Relationship						
Address			Phone ()			Years Acquainted:			

PREVIOUS EMPLOYMENT			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
MILITARY SERVICE			
Branch:		From:	To:
Rank at Discharge:		Type of Discharge:	
If other than honorable, explain:			
<p>If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employer, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.</p> <p>I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.</p>			

DISCLAIMER AND SIGNATURE	
<p>I certify that all the information submitted by me on this application are true and complete to the best of my knowledge. I further understand that if this application leads to employment, any false or misleading information in this application or interview may result in my immediate release. I give the employer the right to contact and verify the accuracy of the information contained in this application.</p> <p>I hereby release from liability the employer and its representatives for seeking, gathering and using such information. I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.</p>	
Signature	Date