

**EMPLOYMENT APPLICATION FORM**

We are an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, creed, religion, sex, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap, and any other legally protected status. It is our policy to abide by all Federal, State and local laws concerning discrimination in employment. No question in this application is intended to elicit information in violation of any such law nor will any information obtained in response to any question be used in violation of any such law.

PERSONAL INFORMATION			
Last Name	First	Middle	Date of Application
Street Address			Home Phone
City, State, Zip			How long at present address?
Were you previously employed by this organization? <input type="checkbox"/> Yes, Date(s)                      Department <input type="checkbox"/> No			
Have you previously applied to this organization? <input type="checkbox"/> Yes, Date(s)                      Department <input type="checkbox"/> No			
Position Applying For:		If hired, how long do you expect to stay?	Wages Expected
Check the following options which you would consider: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary			Phone:
Are you willing to work nights, weekends and holiday? <input type="checkbox"/> Yes <input type="checkbox"/> No (Explain)		Are you employed now? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date available for work

EDUCATION AND TRAINING					
School	Name & Location of School	Course of Study	No. of Years Completed	Did you Graduate?	Diploma or Degree
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
College or University				<input type="checkbox"/> Yes <input type="checkbox"/> No	
College or University				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Apprentice School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
List any other education, training, special skills or certificated/licenses that you possess:					
List any machines or equipment that you are qualified and experienced at operating:					

**ADDITIONAL EMPLOYMENT RELATED INFORMATION**

List any relatives or friends working for this organization:	NAME	RELATIONSHIP
	_____	
	_____	

Can you verify your legal rights to work in the U.S. by providing a birth certificate, proof of U.S. Citizenship, or by some other means?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If you are under 18, can you furnish a work permit?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you able to perform the job(s) for which you are applying?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of a crime in the past 7 years, excluding misdemeanors and summary offenses, which has not been annulled, expunged, or sealed by a court?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If "yes", please describe in detail.		

**REFERENCES:**

**GIVE BELOW THE NAMES OF THREE PERSONS NOT RELATED TO YOU WHOM YOU HAVE KNOWN AT LEAST ONE YEAR**

Name	Address	Phone	Business	Years Known

**LIST PREVIOUS EMPLOYERS STARTING WITH THE MOST RECENT**

Name & Address	Position/Salary	From/To	Reason for Leaving	Supervisor & Phone No.	May We Contact?

**APPLICANT'S CERTIFICATION – PLEASE READ CAREFULLY BEFORE SIGNING**

I certify that my answers are true and correct. If I am hired and any information that I provided in this application is found to be untrue, or if any material statement is omitted, I understand that I may be subject to discipline, up to and including discharge, any time during the period of my employment.

I understand that The Counter (the "Company") has a policy of zero tolerance for drugs in the workplace. If I receive an offer of employment, I agree to fully comply with the Company's Substance Abuse Policy" as stated in the Employee Handbook.

Legal Resolution. The Company is committed to providing a work environment where employees are treated fairly and in accordance with all applicable laws. However, there may be times when an employee believes that he or she has a legal claim arising from his or her employment with the Company. In that case, it is in the best interests of both the employee and the Company to have that dispute resolved fairly and expeditiously. Therefore, all employees of the Company must agree to submit to resolve any and all claims arising from their employment with the Company in the manner detailed in the Company's Legal Resolution Agreement.

At-Will Employment. I understand that this application and/or anything communicated to me during the application process is not intended to and does not create an employment contract between me and the Company. I further understand and agree that, if I receive and accept an offer of employment, my employment relationship with the Company will be "at will" and not for any specified period of time. I understand that this means that either the Company or I may terminate my employment at any time, with or without cause and with or without notice. I understand that in absence of a writing signed by the President of the Company which expressly provides that I will be employed for a specified period of time, no policy, statement, conduct, or action on the part of the Company, or any of its personnel, may change or waive the "at-will" nature of my employment relationship.

Applicant's Signature	Date
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