

# Application for Employment with APCO Pool Specialties Inc.

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

Applicant name: \_\_\_\_\_ Date: \_\_\_\_\_

Position(s) applied for or type of work desired: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Type of employment desired: \_\_\_\_\_ full-time \_\_\_\_\_ part-time \_\_\_\_\_ temporary

Date you will be available to start work: \_\_\_\_\_

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 ever previously applied to our organization? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever been previously employed by our organization? \_\_\_\_\_ Yes \_\_\_\_\_ No

Can you submit proof of legal employment authorization and identity? \_\_\_\_\_ Yes \_\_\_\_\_ No

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

Have you ever been convicted of a crime in the last 7 years? \_\_\_\_\_ Yes \_\_\_\_\_ No

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

Driver's license number (driving is an essential job duty): \_\_\_\_\_

How were you referred to us? \_\_\_\_\_

## Employment History

Please provide all employment information for your past four employers starting with the most recent.

Employer: \_\_\_\_\_ Position held: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Immediate supervisor and title: \_\_\_\_\_

Dates employed: from \_\_\_\_\_ to \_\_\_\_\_ Salary: \_\_\_\_\_

Job summary: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

## Employment History cont.

Employer: \_\_\_\_\_ Position held: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Immediate supervisor and title: \_\_\_\_\_

Dates employed: from \_\_\_\_\_ to \_\_\_\_\_ Salary: \_\_\_\_\_

Job summary: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Employer: \_\_\_\_\_ Position held: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone #: \_\_\_\_\_

Immediate supervisor and title: \_\_\_\_\_

Dates employed: from \_\_\_\_\_ to \_\_\_\_\_ Salary: \_\_\_\_\_

Job summary: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

## Other Skills and Qualifications

Summarize any job-related training, skills, licenses, certificates, and/or other qualifications:

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## Educational History

List school name and location, years completed, course of study, and any degrees earned:

High school: \_\_\_\_\_

College: \_\_\_\_\_

Technical Training: \_\_\_\_\_

Other: \_\_\_\_\_

## References

List 3 references' names, telephone numbers, relation, and years known (do not include relatives or employers):

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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 also 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 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 understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

**I understand that it is the policy of this organization to perform a drug/alcohol test on all applicants prior to any offer of employment being made, and that periodic testing while employed is also required.**

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

**I hereby authorize the potential employer to obtain, and verify the accuracy of any drivers records in association with the name and drivers license number either on this application or any alias or former names. I also 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.**

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Credit Report Disclosure and Authorization Form

In processing your application for employment or, if you are offered employment, at any time during your employment, *APCO POOL SPECIALTIES, INC. POOL SPECIALTIES, INC.* may obtain a consumer credit report from *Consumer Reporting Agency Name* for employment purposes concerning credit worthiness, credit standing, and credit capacity.

\_\_\_\_\_ Check here, if you would like to receive a free copy of your credit report.

Upon receiving the copy of your credit report, if you want to dispute the accuracy or completeness of any item in it, you may contact the consumer reporting agency, whose address and telephone number are included in the report, and request an investigation. (A summary of your rights under the Fair Credit Reporting Act is attached to this form.) If you disagree with the accuracy of any information in the report, you must notify *APCO POOL SPECIALTIES, INC.* within two days of the receipt of the report that you are challenging information in the report. *APCO POOL SPECIALTIES, INC.* will not make a final decision on your employment status until you have had a reasonable opportunity to address the information contained in the report.

Note that if you are denied employment or an adverse employment action is taken based on information obtained in the credit report, you will be notified and provided with a copy of the report as well as a written description of your rights under the Fair Credit Reporting Act.

Please read this form carefully before signing and dating it below, which will authorize *APCO POOL SPECIALTIES, INC.* to obtain a consumer credit report on you as part of the pre-employment background screening process or, if you are offered employment, for employment purposes at any time during your employment.

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I consent to this investigation and hereby authorize *APCO POOL SPECIALTIES, INC.* to obtain a consumer credit report on my background for employment purposes only and acknowledge that I have been provided with a summary of my rights under the Fair Credit Reporting Act.

Name (please print): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_