

APPLICATION FOR EMPLOYMENT

It is the policy of POCID to provide equal employment opportunities to all persons and not to discriminate in its hiring or employment practices on the basis of race, color, religion, sex, national origin, age, physical or mental disability, veteran or military service status, genetic information, or any other status protected by federal, state, or local law.

| | | | |
|-----------------------|------------------------------------|----------------|------|
| Last Name | First Name | Middle Initial | Date |
| | | | |
| Street Address | Home Phone (include area code) | | |
| | | | |
| City, State, ZIP Code | Business Phone (include area code) | | |
| | | | |
| Position Applying For | Social Security Number | | |
| | | | |

GENERAL INFORMATION

Are you related to anyone at POCID? _____

If yes, please provide the name and department of your relative. _____

If hired, can you present proof of your identity and legal authorization to work in the United States? _____

Are you 18 years of age or older? _____

Have you previously submitted an employment application to POCID? _____

When? _____

For what position? _____

Are you available to work: _____

Part time _____

Full time _____

If job requires, can you travel? _____

If job requires, do you have a valid driver's license? _____

EMPLOYMENT DESIRED

Position desired _____

Date you can start _____

Salary desired _____

Can you perform the essential functions of the position that you seek with or without reasonable accommodations? _____

MILITARY

Have you ever been a member of the Armed Services of the United States? _____

Branch of service _____ Period of active duty _____

Describe your duties and any special training.

CRIMINAL RECORDS/SEALED RECORDS

Have you pleaded "guilty" or "no contest" to or been convicted of a misdemeanor (other than a minor traffic violation) or felony? _____

If "yes," please state the nature of the crime(s), when and where convicted, the disposition of the case, and any other relevant information you wish us to consider.

'FOR [MOST] [ALL] POSITIONS AT THE COMPANY, A CONVICTION OF AN OFFENSE WILL NOT AUTOMATICALLY DISQUALIFY AN APPLICANT FOR EMPLOYMENT. [CONVICTIONS FOR OFFENSES INVOLVING _____ WILL PRECLUDE EMPLOYMENT IN THE FOLLOWING POSITIONS: _____.] TO THE EXTENT POSSIBLE, THE COMPANY WILL UNDERTAKE AN INDIVIDUALIZED ASSESSMENT OF THE NATURE, DATE, CIRCUMSTANCES, AND RELEVANCE OF THE OFFENSE TO THE POSITION APPLIED FOR.

EDUCATION

| | Name and Location | Program Studied/Areas of Concentration | Number of Years Completed | Degree or Diploma |
|----------------------|-------------------|--|---------------------------|-------------------|
| High School | | | | |
| College/University | | | | |
| Graduate School | | | | |
| Vocational/Technical | | | | |
| Other | | | | |

SKILLS (Fill in the check boxes to mark all that apply)

Years

| | |
|---|------------|
| <input type="checkbox"/> Typing | WPM: _____ |
| <input type="checkbox"/> Accounting software | _____ |
| <input type="checkbox"/> Microsoft Word/other | _____ |
| <input type="checkbox"/> Microsoft Excel/other | _____ |
| <input type="checkbox"/> Microsoft Access/other | _____ |
| <input type="checkbox"/> Microsoft PowerPoint/other | _____ |
| <input type="checkbox"/> HTML/other | _____ |

 Other, please explain: _____ Other, please explain: _____

Years

| |
|--|
| <input type="checkbox"/> Biology |
| <input type="checkbox"/> Chemistry |
| <input type="checkbox"/> Finance |
| <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Sales |
| <input type="checkbox"/> Human resources |
| <input type="checkbox"/> Manufacturing |
| <input type="checkbox"/> Shipping/receiving |
| <input type="checkbox"/> Legal |
| <input type="checkbox"/> Intellectual property |
| <input type="checkbox"/> Venture capital |
| <input type="checkbox"/> Startups |
| <input type="checkbox"/> Other |

Summarize skills and qualifications that will be of special benefit in the job for which you are applying.**EMPLOYMENT**

Please give accurate, complete full-time and part-time employment information for your last four employers. You may include volunteer positions if you wish. Start with present or most recent employer.

| | | |
|---|--|--|
| 1 | Company Name | Phone (including area code) |
| | Address | Employed (Month/Year) From _____ To _____ |
| | Name of Supervisor | Weekly or Annual Pay Start _____ Last _____ |
| | State Job Title and Describe Your Work | Reason for Leaving |
| 2 | Company Name | Phone (including area code) |
| | Address | Employed (Month/Year) From _____ To _____ |
| | Name of Supervisor | Weekly or Annual Pay Start _____ Last _____ |
| | State Job Title and Describe Your Work | Reason for Leaving |

| | |
|--|--|
| 3 Company Name | Phone (including area code) |
| Address | Employed (Month/Year) From _____ To _____ |
| Name of Supervisor | Weekly or Annual Pay Start _____ Last _____ |
| State Job Title and Describe Your Work | Reason for Leaving |

| | |
|--|--|
| 4 Company Name | Phone (including area code) |
| Address | Employed (Month/Year) From _____ To _____ |
| Name of Supervisor | Weekly or Annual Pay Start _____ Last _____ |
| State Job Title and Describe Your Work | Reason for Leaving |

We may contact the employers listed above unless you indicate otherwise.

DO NOT CONTACT EMPLOYER # (s)

Reason

Please indicate any other name that you have used that would be needed to confirm your employment history.

REFERENCES

List any other references whom we may contact (employment and school references preferred).

| Name | Years Acquainted | How Acquainted | Address/Telephone Number |
|------|------------------|----------------|--------------------------|
| | | | |
| | | | |
| | | | |
| | | | |

It is unlawful in certain states, including [state], to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

APPLICATION RETENTION POLICY

This application is only for a specific position. Please contact the Human Resources office to obtain an application for another position opening.

Agreement

I certify that the information given by me herein is true, accurate, and complete to the best of my knowledge.

I understand that, as part of **POCID** employment procedure, a routine inquiry may be made that will provide applicable information concerning my employment history, performance, and character.

I hereby authorize **POCID** and/or its agents to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment for the purpose of confirming the information contained on my application and/or obtaining other information that may be material to my qualifications for employment.

I release from all liability all persons, companies, and corporations supplying such information, and I also release **POCID** and any of its representatives from any liability as a result of any inquiries made by **POCID** while conducting this investigation. I understand any false answers or statements or implications made by me in the application, in any interview, or in other documents shall be considered sufficient cause for denial of employment or termination of employment if I should be employed by **POCID**. I further understand that my employment with **POCID** is subject to the satisfactory completion of this investigation.

Additionally, I understand that nothing contained in this employment application or in the granting of an interview or in the conduct of such investigation is intended to create an employment contract between **POCID** and myself either for employment or for the providing of any benefit. No promises or representations regarding employment have been made to me, and I understand no such promise, representation, or guarantee, whenever made, whether written or oral, is binding upon **POCID** unless made in writing by the Human Resources Manager of **POCID**. If an employment relationship is established, I understand that employment with **POCID** is "at will" and if hired, I acknowledge that I have the right to terminate employment, with or without advance notice, for any reason at all, at any time and that **POCID** retains the same right.

If employed, I agree to sign **POCID** Employee Handbook, which outlines the **POCID**'s policies and procedures for its employees. In addition, if employed, I agree to sign **POCID** Employee Technology and Non-Disclosure Agreement, in which I agree to protect and not divulge any confidential information I have gained through employment with **POCID** (This agreement also sets forth the conditions under which **POCID** is assigned the entire right, title, and interest of certain inventions or ideas, including computer programs, developed while in **POCID**'s employ).

If offered employment with **POCID**, I understand that my employment is contingent upon the presentation of documents establishing my identity and eligibility to work in the United States.

I also understand that, if employed, I will be required to abide by all rules and regulations of **POCID** and to complete satisfactorily a "new employee" period of employment during which I will not be eligible for certain benefits.

Signature of Application

Date

Interviewed By

Date