



EMPLOYMENT APPLICATION

TODAY'S DATE: _____
_ _ !W!kk

NAME: _____
LAST
FIRST
M.I.

HOME PHONE: _____ WORK PHONE: _____

CURRENT ADDRESS: _____
STREET

CITY
STATE
ZIP

PRIOR ADDRESS: _____
STREET

CITY
STATE
ZIP

APPLICATION NOTE

This application form is intended for use in evaluating your qualifications for employment. This is not an employment contract. Please answer all appropriate questions completely and accurately. False or misleading statements during the interview and on this form are grounds for terminating the application process or, if discovered after employment, terminating employment. All qualified applicants will receive consideration without discrimination because of sex, marital status, race, age, creed, national origin or the presence of disabilities. A felony conviction will not necessarily bar an applicant from employment. Additional testing of job-related skills may be required prior to employment. All applicants who are being considered for employment will be required to submit to a drug screening prior to starting employment. Any applicant who tests positive for an illegal drug will be eliminated from any possible employment. The drug screen will test for any illegal drugs Nuvar determines necessary including, but not limited to: Amphetamines, Cocaine, Opiates, Phencyclidine and THC 50, and will be administered by an organization selected by Nuvar.

AVAILABILITY

For which position are you applying? _____

How did you hear about this position? _____

JOB-RELATED SKILLS

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Have you been given a job description or had the requirement of the job explained to you?
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Do you understand these requirements?
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	Can you perform the requirements of this job with or without reasonable accommodation?

EDUCATION

Select # of years of completed education:

NAME	CITY/STATE	GRADUATE?	DEGREE?
HS			
College			
Other			

PREVIOUS EMPLOYMENT

PLEASE NOTE: Your application will not be considered unless every question in this section is answered. Since we will make every effort to contact previous employers, the *correct telephone numbers of past employers are critical*. Ask for a phone book or call information if you need to. FOR EMPLOYERS OUTSIDE THE U.S., A CURRENT FAX NUMBER IS MANDATORY.

MOST RECENT EMPLOYER

Yes No Are you currently working for this employer?
 Yes No If Yes, may we contact?

Company Name
From _____ To _____
City _____ State _____
Dates Employed _____
Job Title _____ Supervisor Name _____
Per _____
Phone _____ Fax _____ Salary _____ (Hour, Week, Month) _____
Reason for Leaving _____

SECOND MOST RECENT EMPLOYER

Yes No Are you currently working for this employer?
 Yes No If Yes, may we contact?

Company Name
From _____ To _____
City _____ State _____
Dates Employed _____
Job Title _____ Supervisor Name _____
Per _____
Phone _____ Fax _____ Salary _____ (Hour, Week, Month) _____
Reason for Leaving _____

THIRD MOST RECENT EMPLOYER

Yes No Are you currently working for this employer?
 Yes No If Yes, may we contact?

Company Name
From _____ To _____
City _____ State _____
Dates Employed _____
Job Title _____ Supervisor Name _____
Per _____
Phone _____ Fax _____ Salary _____ (Hour, Week, Month) _____
Reason for Leaving _____

REFERENCES

Include only individuals familiar with your work ability. Do not include relatives.

Name	Address/Phone	Years Known/Relationship

CERTIFICATION AND RELEASE

Please write your initials in each box below

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or mistreatment of material fact on this application or any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I hereby authorize the company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment. I further authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

I hereby agree to submit to binding arbitration all disputes and claims arising out of the submission of this application. I further agree, in the event that I am hired by the company, that all disputes that cannot be resolved by informal internal resolution which might arise out of my employment with the company, whether during or after that employment, will be submitted to binding arbitration. I agree that such arbitration shall be conducted under the rules of the American Arbitration Association. This application contains the entire agreement between the parties with regard to dispute resolution, and there are no other agreements as to dispute resolution, either oral or written.

I understand that nothing contained in the application, or conveyed during any interview that may be granted or during my employment, if hired, is intended to create an employment contract between the company and me. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either the company or myself. Moreover, I understand and agree that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

Signature	Date
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CRIMINAL HISTORY REPORT AUTHORIZATION

Have you been convicted of a crime within the last seven years? If so, please explain (a conviction will not necessarily bar an applicant from employment):

I hereby authorize Nuvar, Inc. to obtain a criminal history report as part of the pre-employment screening process. If hired, this authorization will remain on file and will serve as an ongoing authorization for Nuvar to obtain criminal history reports at any time during my employment. I understand that I must provide my date of birth to adequately complete this screening, and acknowledge that this information will not affect any hiring decisions.

Signature	Date
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Last name	First Name	Middle Initial	
Other names used (include maiden name and/or any aliases)			
Address			
City, State & Zip			
Social Security Number			
Date of Birth	Driver's License Number	State	Sex - M/F