

Disability Resources, Inc. / New2U Computers

Application for Employment

An Equal Opportunity Employer

PERSONAL INFORMATION

| | | | |
|---------------|-------|--------------|----------|
| Last | First | | |
| Address | City | State | Zip Code |
| Email Address | | Phone Number | |

EMPLOYMENT DESIRED

| | | |
|--|--|-----------------------------|
| Position Desired | Date you can start | Hourly Rate/ Salary Desired |
| Are you currently employed? Yes No | If so, may we inquire of your present employer? Yes No | |
| Have you ever applied to DRI/ N2U before? Yes No | When? | Explain |
| Have you ever worked for DRI before? Yes No | When? | Where? |
| Reason for leaving | | |
| Name of last supervisor at this company? | | |

REFERRAL SOURCE

| | | | |
|----------------------------|---------|---------------|----------|
| How did you hear about us? | Walk In | Advertisement | Referral |
| Referral Name: | | | |
| Other: | | | |

EDUCATION

| School Level | Name and Location | Degree Received ? Y/N | Subjects Studied/ Degree Earned |
|---|-------------------|-----------------------|------------------------------------|
| High School | | | |
| College or University | | | |
| Trade, Business or Correspondence School | | | |

GENERAL

| |
|--|
| Subjects of Special Study or Research Work |
| Special Skills, Experience or Training |
| Computer Skills |

EMPLOYMENT HISTORY

Include your last five (5) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time.

| | | | |
|---|--------------|--|---------------------|
| Name of present or last employer | | Phone | |
| Address | | City | State Zip Code |
| Starting date | Leaving date | Job Title | |
| | | May we contact your employer? Yes No | |
| Name of Supervisor | | | |
| Description of work; Summarize the nature of work performed and job responsibilities: | | | |
| | | | |
| Reason for leaving | | | |

| | | | |
|---|--------------|--|---------------------|
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| Starting date | Leaving date | Job Title | |
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| | | | |
| Reason for leaving | | | |

OTHER EXPERIENCES THAT MIGHT FURTHER QUALIFY YOU FOR THE POSITION YOU SEEK

| |
|--|
| |
| |
| |

REFERENCES *Give the names of three professional references*

| | Name | Phone | Business | Years Acquainted |
|------------------------|------|-------|----------|------------------|
| Professional Reference | | | | |
| Professional Reference | | | | |
| Professional Reference | | | | |

CONSENT/AUTHORIZATION

Disability Resources, Inc. / New2U Computers is an equal opportunity employer. Disability Resources, Inc./ New2U Computers does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex, sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service. I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Disability Resources, Inc. / New2u Computers to hire me. If I am hired, I understand that either Disability Resources, Inc. / New2U Computers or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Disability Resources, Inc. / New2U Computers has the authority to make any assurance to the contrary. I attest with my signature below that I have given to Disability Resources, Inc. / New2U Computers true and complete information on this application. No requested information has been concealed. I authorize Disability Resources, Inc./ New2U Computers to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal. I hereby acknowledge that I have been advised that this application will remain active for no more than 60 days from the date it was signed.

Signature

Date

FOR OFFICE USE ONLY

Date Received