

PREVIOUS EMPLOYMENT:

Company _____ Address _____ (Street) _____ (City) _____ (State) _____

Telephone _____ Kind of Business _____ Name and Title of Immediate Supervisor _____
 (Include Area Code)

Employed From _____ to _____ Job Title _____
 (Mo., Yr.) (Mo., Yr.)

Duties Performed _____

Starting Salary _____ Final Salary _____ Reason for Leaving _____

PREVIOUS EMPLOYMENT: (Use additional sheets if necessary to describe all previous employment)

Company _____ Address _____ (Street) _____ (City) _____ (State) _____

Telephone _____ Kind of Business _____ Name and Title of Immediate Supervisor _____
 (Include Area Code)

Employed From _____ to _____ Job Title _____
 (Mo., Yr.) (Mo., Yr.)

Duties Performed _____

Starting Salary _____ Final Salary _____ Reason for Leaving _____

EDUCATION:

	Name	City/State	Degree Received Yes or No	Type of Degree Diploma or GED	Major
High School	_____	_____	_____	_____	_____
College	_____	_____	_____	_____	_____
Other	_____	_____	_____	_____	_____
Trade School	_____	_____	_____	_____	_____

Commercial courses completed (Include skills, typing, shorthand, business machines, personal computers, etc.) _____

GENERAL:

Are you authorized to work in the United States? _____ Yes _____ No (Proof of citizenship or immigration status will be required upon employment.)

Are you 18 years old or older? _____ Yes _____ No How did you happen to contact our company? _____

Are you available to work full-time _____ part-time _____ temporary _____? If part-time, indicate maximum hours per week _____

What position are you applying for? _____ Starting salary desired _____

Are you currently on layoff or leave from another employer? _____ Yes _____ No

CONVICTION INFORMATION:

Within the last ten (10) years, have you been convicted of a crime, **OTHER THAN FOR** (1) an arrest, detention or disposition regarding any violation of law in which no conviction resulted; or (2) a first conviction for any of the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, affray, or disturbance of the peace; or (3) any conviction of a misdemeanor where the date of such conviction or the completion of any period of incarceration occurred five or more years prior to the date of such application for employment or such requests for information? Yes No
If yes, state date, place and nature of offense(s). _____

Conviction information will not necessarily bar an applicant from employment.

NOTICE: LIE DETECTOR TEST:

It is unlawful in Massachusetts 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.

NOTICE: PLEASE READ BEFORE SIGNING

- If I am hired, I agree to abide by the rules and policies of The FootBridge Companies.
- I understand that if I am hired, my employment will be for no definite period, and that my employment and compensation can be terminated with or without cause and without notice, at any time, at the option of either The FootBridge Companies or me.
- I authorize all persons, companies, prior employers, schools, credit bureaus, and government agencies to supply any information concerning my background, education, and employment and criminal record, and release all parties from all liability for any damage that may result from furnishing same to you. I also release The FootBridge Companies and its agents from all liability from damages arising from this research of my background.
- I certify that the information contained in this application is complete and correct to the best of my knowledge and understand that falsification of this information is grounds for dismissal in accordance with The FootBridge Companies policy.
- I certify that all of the information that I provide on this application or in any interview will be complete, true, and accurate. I understand that if I am hired, and any such information is later found to be incomplete, false, or misleading in any respect, I may be discharged.
- I agree to comply with The FootBridge Companies Drug and Alcohol Policy.

I have read and fully understand the above Notice Section.

(Print Name)

(Signature)

(Date)