

The Mail Center, Etc.

Employment Application Form

STOP & READ

- ✓ Print all information requested except signature.
- ✓ Fill in all blanks – No exceptions!

Please deliver completed application to:
 969 Oak Ridge Turnpike
 Oak Ridge, TN 37830

- ✓ We offer a non-smoking work environment and we do not provide a smoking area, or smoking breaks!

Resumes and Cover Letters are encouraged and may be attached to application. Be sure to answer all questions.

PLEASE COMPLETE PAGES 1- 4.

DATE _____

Name _____
Last First Middle Maiden

Present address _____
Number Street City State Zip

How long _____ Social Security No. _____ - _____ - _____

Telephone () _____ Telephone () _____ Email _____

Are you under age 18 ____ YES ____ NO, if "YES", can you provide proof of your eligibility to work? ____ YES ____ NO

Are you currently authorized to work in the United States? ____ YES ____ NO. Proof of eligibility will be required if hired.

DO NOT LEAVE THIS SECTION BLANK:

Wage desire or expected (1) _____
 (Be specific)

Days/hours available to work
 No Pref _____ Thur _____
 Mon _____ Fri _____
 Tue _____ Sat _____
 Wed _____

How many hours can you work weekly? _____

Employment desired FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME SEASONAL

When are you available to start work? _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	YEAR COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

Have you ever been convicted of a crime which is substantially related to the functions or qualifications of the job for which you are applying? No Yes A Conviction record will not necessarily disqualify you from employment.

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

The Mail Center, Etc.

Work experience: Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary**

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	Pay or salary
		From To	Start Final
	Your last job title		

Reason for leaving (be specific)

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.

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May we contact your present employer? Yes No

Did you complete this application yourself Yes No If not, who did? _____

After reviewing the description on page 2, please indicate if you are able to perform the essential functions of the job for which you have applied ____ Yes ____ No. If you answered "No", please identify those job functions that you cannot perform. If a reasonable accommodation is required to enable you to perform the job properly and safely, please describe:

PLEASE READ CAREFULLY – INITIAL WHERE INDICATED – SIGN LAST PAGE

APPLICATION FORM WAIVER

As indication that you have read and understood each sentence, please write your initials in the spaces provided below.

In exchange for the consideration of my job application by The Mail Center, Etc. (hereinafter called "the Company"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment,____ or to confer any right to remain an employee of The Mail Center, Etc., or otherwise to change in any respect the employment-at-will relationship between it and the undersigned,____ and that relationship cannot be altered except by a written instrument signed by the Owner/Managing Member of the Company.____ Both the undersigned and The Mail Center, Etc. may end the employment relationship at any time, without specified notice or reason.____ If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits._____

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living.____ Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.____

I further understand that my employment with the Company shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relationship with the Company is terminable at will for any reason by either party._____

Signature of applicant _____ **Date:** _____

The Mail Center, Etc. is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, gender, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with The Mail Center, Etc. depends solely on your qualifications.

Thank you for completing this application form and for your interest in our business.