

Social Security No.: _____

Today's Date: _____

Date of Birth (month/day only): _____

Please print clearly in ink

PERSONAL

First Name: _____ Last Name: _____ MI: _____

Address: Street and Number: _____

City: _____ State: _____ Zip: _____

Phone Number: (____) _____ Alternate Number: (____) _____

Emergency Phone Number: (____) _____ Emergency Point of Contact: _____

e-mail: _____ Pager/Cell Phone: _____

Are you currently employed: Yes F/T P/T No May we contact your employer: Yes No N/A

Are you legally authorized to work in the US: Yes No Do you have transportation to/from work: Yes No

Have you been convicted of a felony or misdemeanor in the past seven years: Yes No

If yes, explain: _____

EMPLOYMENT

Position Desired: 1) _____ 2) _____

Date you can start: _____ Hourly Pay Rate/Salary Desired: _____

Type of Employment: Full Time Part Time Temporary Days* Nights* *Hours: _____

Will you work overtime if necessary: Yes No If yes, how many hours per week: _____

Are there any reasonable accommodations you need in order to perform the positions you listed above: _____

Local areas you would commute to: 1) _____ 2) _____ 3) _____

Have you ever applied with us before: Yes No If so, when: _____

How did you hear about us: _____

EDUCATION

High School Graduate: Yes No If No, Grade Completed: _____ Diploma GED N/A

College: _____ Graduated: _____ Major: _____ GPA: _____

Years Completed: _____ Degree: Yes No

Additional Training: _____

May we contact your education institutions: Yes No If no, explain: _____

EMPLOYMENT HISTORY

Please complete even though you may have a resume. Military and verifiable voluntary experience may be included.

Please Print:

1. Current/Previous Employer: _____ Employment Dates: _____
Address: _____ Position Title: _____

Hourly Pay Rate/Salary: _____
Company Phone Number: (_____) Bonus/Incentives: _____
Duties/Responsibilities: _____ Full-time Part-time Temporary

Reason for Leaving: _____
May we contact? Yes No

2. Current/Previous Employer: _____ Employment Dates: _____
Address: _____ Position Title: _____

Hourly Pay Rate/Salary: _____
Company Phone Number: (_____) Bonus/Incentives: _____
Duties/Responsibilities: _____ Full-time Part-time Temporary

Reason for Leaving: _____
May we contact? Yes No

3. Current/Previous Employer: _____ Employment Dates: _____
Address: _____ Position Title: _____

Hourly Pay Rate/Salary: _____
Company Phone Number: (_____) Bonus/Incentives: _____
Duties/Responsibilities: _____ Full-time Part-time Temporary

Reason for Leaving: _____
May we contact? Yes No

4. Current/Previous Employer: _____ Employment Dates: _____
Address: _____ Position Title: _____

Hourly Pay Rate/Salary: _____
Company Phone Number: (_____) Bonus/Incentives: _____
Duties/Responsibilities: _____ Full-time Part-time Temporary

Reason for Leaving: _____
May we contact? Yes No

REFERENCES

Please List 3 professional references who can verify your employment history, job performance, and work ethic. References should be direct supervisors or managers, preferably not relatives or friends.

Please Print:

1. Name: _____ Title: _____
 Company Name and Address: _____
 Phone Number: (_____) _____ ext. _____ Fax: _____
 Did you report directly to this person? Yes No Years Acquainted: _____

2. Name: _____ Title: _____
 Company Name and Address: _____
 Phone Number: (_____) _____ ext. _____ Fax: _____
 Did you report directly to this person? Yes No Years Acquainted: _____

3. Name: _____ Title: _____
 Company Name and Address: _____
 Phone Number: (_____) _____ ext. _____ Fax: _____
 Did you report directly to this person? Yes No Years Acquainted: _____

Please list the temporary positions & companies where you have worked in the past 2 years.

Please rate from 1-5 (1 low - 5 high)

Environment Challenge of work Interest to return

Co. Name: _____ 1 2 3 4 5 1 2 3 4 5 1 2 3 4 5
 Position: _____
 Reported to: _____

Co. Name: _____ 1 2 3 4 5 1 2 3 4 5 1 2 3 4 5
 Position: _____
 Reported to: _____

Co. Name: _____ 1 2 3 4 5 1 2 3 4 5 1 2 3 4 5
 Position: _____
 Reported to: _____

Co. Name: _____ 1 2 3 4 5 1 2 3 4 5 1 2 3 4 5
 Position: _____
 Reported to: _____

Co. Name: _____ 1 2 3 4 5 1 2 3 4 5 1 2 3 4 5
 Position: _____
 Reported to: _____

WORKING SKILLS

If applicable, please check all your current skills:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Accounts Payable | <input type="checkbox"/> Credit/Collections | <input type="checkbox"/> General Ledger | <input type="checkbox"/> Shorthand |
| <input type="checkbox"/> Accounts Receivable | <input type="checkbox"/> Customer Service | <input type="checkbox"/> Human Resources | <input type="checkbox"/> Statistical Typing |
| <input type="checkbox"/> Administrative Assist. | <input type="checkbox"/> Data Entry | <input type="checkbox"/> Mailroom | <input type="checkbox"/> Stock Clerk |
| <input type="checkbox"/> Bookkeeping | <input type="checkbox"/> Dictaphone | <input type="checkbox"/> Office Management | <input type="checkbox"/> Switchboard |
| <input type="checkbox"/> Call Center | <input type="checkbox"/> Executive Assist. | <input type="checkbox"/> Payroll | <input type="checkbox"/> System Admin. |
| <input type="checkbox"/> Copy Center | <input type="checkbox"/> Financial Analysis | <input type="checkbox"/> Reception | <input type="checkbox"/> Telemarketing |
| <input type="checkbox"/> Cost Accounting | <input type="checkbox"/> General Clerical | <input type="checkbox"/> Shipping/Receiving | <input type="checkbox"/> Word Processing |

Other Please explain: _____

10 key by touch Yes No

Typing Speed: _____ (wpm)

Shorthand: _____ (wpm)

Computer Experience:

Software Applications: _____
(Please be specific)

Phone Systems: _____

Platform: PC Mac Other _____ Operating Systems: Windows DOS UNIX Sys 7

APPLICANT AGREEMENT

Read carefully before signing:

I certify that the answers and statements given herein on my Application, Employment History, References, and in my interview are true and complete to the best of my knowledge. I understand that I will be subject to immediate dismissal or refusal of hire if at any time material falsification, omission, or misrepresentation of facts in the above noted are discovered by New Concept Inc., (NCI) or one of its Clients.

I understand that the completion of this application does not imply nor indicate that positions are available or that I will be employed by NCI or one of its Clients.

I acknowledge and realize that, unless otherwise defined, any employment relationship with NCI or its Clients is of an "at will" nature, which means that I may resign and that NCI may discharge me at any time with or without cause.

I permit NCI to inquire and investigate my previous background, employment and education, as well as contact my professional references. I authorize the release of information by past employers, co-workers, schools, and references as given. I further allow NCI to release such information to any potential employer to evaluate my experience, qualifications, and work ethic. I know I have the right to request viewing of reference information in my file. I further understand that placement at certain NCI clients may require additional screening including but not limited to drug screening, credit check and criminal background. I agree to these conditions of placements as applicable.

I will not accept responsibility of cash, valuables, or alcoholic beverages while on any assignment, nor operate a vehicle or heavy machinery, and if in so doing, take complete liability and know it is grounds for discharge by NCI. If I am requested to do so I will contact NCI immediately.

When on assignment, I understand that I am an employee of NCI. I understand that NCI has a contract with its Clients and agree to contact NCI immediately if offered direct employment by one of their Clients (or Client referred company) within 12 months after the last day of my assignment. This includes full-time, part-time, temporary, or consulting employment (including through another agency).

Signature of Applicant: _____ Date: _____