

The Resource Groups, LLC

Application for Employment

- All information obtained within this application will be held in strict confidence, subject to applicable law.
- Please complete all applicable sections and sign the last page.
- Please print clearly.

The Resource Groups prides itself on being an Equal Opportunity Employer in accordance with State and Federal laws. The Resource Groups will contact all previous employers and professional references.

Position(s) Applied For _____ Date _____

Name _____
Last First MI

Address _____
Street City State Zip Code

Cellular Telephone (_____) _____ Email _____

Social Media Accounts _____

Date of Birth _____ Social Security Number _____

If you are under 18, can you furnish a work permit?..... YES NO

Have you ever been employed here before? YES NO

Are you legally eligible for employment in the U.S.?..... YES NO
(Proof of U.S. citizenship or immigration status will be required upon employment.)

Date available for work _____

Type of employment desired Full Time Part Time

Are you able to meet the attendance requirements for the position? YES NO

Do you have reliable transportation? YES NO

Do you have a valid driver's license? YES NO

License number _____ State _____

List all alias/maiden names: _____

Have you ever been convicted of a felony? YES NO
(Such conviction may be relevant if job related, but does not bar you from employment.)

If yes, please explain: _____

Have you ever been charged or convicted of a civil or criminal offense? YES NO

If yes, please explain: _____

EDUCATIONAL BACKGROUND

Name and Location	Years Completed	Did You Graduate?	Course of Study
High School			
College			Degree?
Other			

EMPLOYMENT HISTORY

List your last four (4) employers, assignments or volunteer activities, starting with the most recent, including military experience

From	To	Employer	Telephone
Job Title		Address	
Immediate Supervisor		Summarize the nature of work performed and job responsibilities	
Reason of leaving		Hourly Rate/Salary Start \$ _____ per _____ Final \$ _____ per _____	
From	To	Employer	Telephone
Job Title		Address	
Immediate Supervisor		Summarize the nature of work performed and job responsibilities	
Reason of leaving		Hourly Rate/Salary Start \$ _____ per _____ Final \$ _____ per _____	
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Job Title		Address	
Immediate Supervisor		Summarize the nature of work performed and job responsibilities	
Reason of leaving		Hourly Rate/Salary Start \$ _____ per _____ Final \$ _____ per _____	

SKILLS & QUALIFICATIONS

Summarize special skills and qualifications acquired from employment or other experiences that may qualify you for work with our company.

PROFESSIONAL REFERENCES

Name	Telephone	Years Known

All applicants and employees are subject to a complete background check and mandatory drug screenings. False information given or implied on this application form is grounds for immediate dismissal without further notice.

I hereby state that all information provided is accurate and may be verified by The Resource Groups. I agree that I may be discharged if The Resource Groups at any time learns of falsification or material omission in the information provided on this application form and related documents. The Resource Groups may contact my former employer in connection with consideration of my employment with them. All references are hereby authorized to release all information which they have relevant to my employment with them. I hereby release The Resource Groups, its affiliates, successors, and assigns, and all references from any liability that might be claimed because of information provided by such references.

I agree that I will follow all Company policies, rules, procedures, and all other directions pertaining to my employment. I understand that The Resource Groups reserves the right to add, change, and/or delete any policies, procedures, work rules, and/or benefits at any time. I understand that just as I am free to resign at any time, The Resource Groups reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the Resource Groups has the authority to make assurances to the contrary.

Applicant Signature _____ Date _____

No consideration of employment will be given to any applicant who does not sign the above statement or the Consent to Drug and Alcohol Testing.

Updated: 6/2021