

APPLICATION FOR EMPLOYMENT

(Valid for 90 Days)



We are an equal opportunity employer, dedicated to a policy of avoiding discrimination on the basis of race, color, age, religion, sex, national origin, handicap, disability, marital status, or veteran status.

Please complete all sections. Please print.

Last Name First Middle Social Security Number Date

Present Address: Street City/State Zip Code Telephone Number

Permanent Address: Street City/State Zip Code Telephone Number

Are you 18 years of age or older? YES NO Referred by: _____

Only U.S. citizens or aliens who have a legal right to work in the U.S. are eligible for employment. Can you, upon employment, submit documentation verifying your legal right to work in the U.S. and your identity?

YES NO

If yes, through what date are you currently eligible to work in the U.S? _____

EMPLOYMENT DESIRED

Position Desired Date You Can Start Salary Desired

Are you employed now? YES NO

If yes, may we contact your present employer? YES NO

May we contact your previous employers? YES NO

If no, please identify those we may not contact and state the reason: _____

Are you on a layoff? YES NO Are you subject to recall? YES NO

Ever applied to ISF before? YES NO

If yes, when? _____ Where? _____

Have you ever been employed by ISF before? YES NO

If yes, give dates: _____

Do you have any friends or relatives who work for ISF? YES NO

Name: _____ Relationship: _____

Name: _____ Relationship: _____

EDUCATION

School	Name and Location of School	No. of Years Completed	Degree	Major Course of Study	Grade Average
High School				SAT Score:	
College					
Graduate School					
Trade, Business, Night, or Correspondence					

Other Skills: List any other job-related skills or qualifications that support your application. _____

Honors Received: _____

In order to permit a check of your employment and educational records, should we be made aware of any change of name or assumed name that you previously used? YES NO

If yes, please identify names and relevant dates: _____

BACKGROUND

Have you ever been convicted of or pled guilty, nolo contendere, or no contest to a crime? YES NO

If yes, give details (date, place, offense(s), disposition, etc.) (Use additional sheets if necessary): _____

Have you ever been charged with a crime and either been placed on court-ordered probation, had adjudication withheld, or entered into a pre-trial intervention program? YES NO

If yes, give details (date, place, offense(s) charged, disposition, etc.) (Use additional sheets if necessary):

A conviction will not necessarily disqualify you from employment.

EMPLOYMENT EXPERIENCE

List all previous employers beginning with the current or most recent employer. Use additional pages if necessary. THIS SECTION MUST BE FILLED OUT COMPLETELY INCLUDING PHONE NUMBERS AND PAST SALARY.

Dates Employed (From/To):	Employer:	
Address:	Supervisor:	Telephone:
Position Title:	Rate/Salary (Starting/Final):	
Duties:		
Reason for Leaving:		

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Position Title:	Rate/Salary (Starting/Final):	
Duties:		
Reason for Leaving:		

Please explain any gaps in your employment history: _____

Have you received any written reprimands, disciplinary suspensions, been discharged, or been asked to resign from any previous employment? YES NO If yes, please explain (include whom, when, and for what):

IN CASE OF EMERGENCY, NOTIFY:

Name Phone Number Relationship

Address City/State Zip Code

Spouse's Name Address Place of Employment

DRIVING RECORD (Complete only if probability of driving on ISF business exists in the position for which you are applying)

Do you have a valid driver's license? YES NO What class is your license? _____

Driver's license number: _____ Which state? _____

Have you had a suspension, revocation, or probation of your license? YES NO

How many speeding or other moving violations have you received in the last three (3) years? _____

List all traffic violations (except parking) on your record for the last five (5) years and all accidents in which you were involved (use additional pages if necessary):

Date	Location	Description	Result

CHARACTER REFERENCES (REQUIRED)

Provide contact information for at least three (3) former supervisors, whom you have known for one year or more.

Name	Address/Phone	Business	Years Acquainted

List any other information or remarks that you wish to have considered as a part of your application for employment

APPLICANT'S CERTIFICATION

I hereby certify that all of the facts and information listed on this employment application are true and complete. I understand that any false, incomplete, or misleading information given by me on this application is sufficient cause for rejection of this application. I also understand and agree that any such false, incomplete, or misleading information given by me or discovered on this application at any time after I am employed may result in my dismissal.

I hereby authorize ISF or authorized agent to investigate all statements contained in this application, to interview the references and previous employers listed in this application, and to obtain a credit report from a consumer reporting agency to be used for employment purposes in accordance with the Fair Credit Reporting Act. I authorize the references, previous employers, and others listed to give ISF all facts, opinions, and evaluations concerning my previous employment, and any other information they may have, personal or otherwise, and I release all such parties from any liability for defamation or invasion of privacy.

I understand that if I am offered employment, I will be required to serve a 180-day probationary period. I further understand that no supervisor or other representative of ISF other than the President or Chief Operating Officer has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing. If my application is accepted for employment, I understand that it is my responsibility to keep an accurate and complete record of my hours worked each day.

I understand, as a condition of employment, I will be requested to execute a confidentiality and intellectual property agreement as well as a non-compete agreement. You will also be asked to sign that acceptance of employment at ISF does not constitute a violation of any prior non-compete or confidentiality agreement by which you may be bound.

I understand and voluntarily agree, as a condition of employment or my continued employment, that I may be requested by ISF to submit to a urinalysis or other drug screen test, and that my failure to take such test(s) when requested to do so or unsatisfactory results will disqualify me from consideration for employment, or if I am then employed, may result in immediate dismissal.

I certify that I have read, understand, and agree with the above.

Signature of Applicant

Date