

APPLICATION FOR EMPLOYMENT

Florida Design Consultants is an equal opportunity employer and does not discriminate against any applicant or employee because of race, color, religion, sex, national origin, disability, age, or military or veteran status per federal law. In addition, FDC complies with applicable state and local laws governing nondiscrimination in employment in every jurisdiction in which it maintains facilities. FDC also provides reasonable accommodation to qualified individuals with disabilities in accordance with applicable laws.

PLEASE PRINT

Position(s) Applied for:	Date of Application		
How Did You Learn About Us? <input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Walk-In <input type="checkbox"/> Employment Agency <input type="checkbox"/> Relative <input type="checkbox"/> Other _____			
Last Name	First Name	Middle Name	
Address	City	State	Zip Code
Telephone Number(s)	Email Address		

If you are under 18 years of age, can you provide the required proof of your eligibility to work? Yes No

Have you ever filled out an application with us before? Yes No
 If yes, give date _____

Have you ever been employed with us before? Yes No
 If yes, give date _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you authorized to work in the United States? Yes No

(Federal law requires that employers hire only individuals who are authorized to be lawfully employed in the United States. In compliance with these laws, FDC will verify the status of every individual offered employment with the Company. In this connection, all offers of employment are subject to verification of the applicant's identity and employment authorization, and it will be necessary for you to submit such documents as are required by law to verify your identification and employment authorization.)

On what date would you be available for work? _____

Are you available to work: Full Time Part Time Shift Work Temporary

Are you currently on "lay off" status and subject to recall? Yes No

Can you travel if a job requires it? (Most travel is within the state.) Yes No

Have you been convicted of a felony within the last 7 years? Yes No

(Conviction will not necessarily disqualify an applicant from employment.)

If yes, please explain _____

WE ARE AN EQUAL-OPPORTUNITY EMPLOYER

EDUCATION

	High School	Undergraduate College/University	Graduate/Professional
School Name and Location			
Diploma/Degree			
Focus of Study			
Summarize any exclusive training, apprenticeship, skills, and/or extracurricular activities.			
Describe any honors you have received.			
State any additional information you feel may be helpful to us in considering your application.			
List professional trade business or civic activities and offices held. <i>You may exclude membership which would reveal sex, race, religion, national origin, age, ancestry, handicap, or other protected status:</i>			

REFERENCES

Give name, address, and telephone number of three references that are not related to you and are not previous employers.

1. _____

2. _____

3. _____

Have you ever had any job-related training in the United States military? Yes No
 If yes, please describe _____

Are you capable of performing the essential functions of the job for which you are applying with or without reasonable accommodation? Yes No

EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, handicap, or other protected status.

If this information is included on your resume, check this box and skip this section.

Employer	<u>Dates Employed</u> From To	Work Performed
Address		
Telephone Number(s)	<u>Hourly Rate/Salary</u> Starting Final	
Job Title	Supervisor	
Reason for Leaving		
Employer	<u>Dates Employed</u> From To	Work Performed
Address		
Telephone Number(s)	<u>Hourly Rate/Salary</u> Starting Final	
Job Title	Supervisor	
Reason for Leaving		
Employer	<u>Dates Employed</u> From To	Work Performed
Address		
Telephone Number(s)	<u>Hourly Rate/Salary</u> Starting Final	
Job Title	Supervisor	
Reason for Leaving		

List any special job-related skills and qualifications acquired from employment or other experiences.

If you need additional space, please continue to page 5.

APPLICANT'S STATEMENT

PLEASE READ CAREFULLY BEFORE SIGNING THIS APPLICATION

I have submitted the attached form to the company to obtain employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the company to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume, or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from the Company's employ.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with the Company in the position I am seeking.

I understand that this application is not an employment contract for any specific length of time between the Company and me and that in the event I am hired, my employment will be "at will" and either the Company or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy, and the like, distributed by the Company to its employees is intended to or can create an employment contract, an offer of employment, or any obligation on the Company's part. The Company may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge, or change any benefit, policy practice, condition, or process affecting its employees.

References: I hereby authorize the company and its agents to make such investigations and inquiries into my employment and educational history and other related matters as may be necessary for arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquiries connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services, or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for the purposes of evaluating my credentials and qualifications.

I hereby acknowledge that I have read and understand the preceding statement.

Signature

Date

