



InSource Technologies
 12124 CR 111, Paulding, OH 45879

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION (*REQUIRED)

DATE

NAME	LAST*	FIRST*	MIDDLE	PREVIOUS
ADDRESS	STREET ADDRESS*			SUITE/APT.
	CITY*		STATE*	ZIP*
CONTACT	MOBILE*	HOME	EMAIL	

EMPLOYMENT DESIRED (CIRCLE ALL THAT APPLY)

POSITION	GENERAL LABOR	SUPERVISOR	OTHER (DESCRIBE)		
HOURS	FULL TIME	PART TIME	SEASONAL	SHIFT	1ST 2ND 3RD
AVAILABLE	IMMEDIATELY	2 WEEKS	OTHER (DATE)		

EXPECTED HOURLY RATE

HAVE YOU APPLIED HERE BEFORE? YES NO

REFERRED BY NEWSPAPER RADIO FACEBOOK FRIEND(NAME):

ARE YOU AUTHORIZED TO WORK LAWFULLY IN THE UNITED STATES? YES NO

IN COMPLIANCE WITH FEDERAL LAW, ALL PERSONS HIRED WILL BE REQUIRED TO VERIFY IDENTITY AND ELIGIBILITY TO WORK IN THE UNITED STATES AND TO COMPLETE THE REQUIRED EMPLOYMENT ELIGIBILITY VERIFICATION FORM UPON HIRE.

EDUCATION RECORD

HIGH SCHOOL

NUMBER OF YEARS ATTENDED DEGREE EARNED

TRADE/BUSINESS SCHOOL

NUMBER OF YEARS ATTENDED DEGREE EARNED

UNDERGRADUATE SCHOOL

NUMBER OF YEARS ATTENDED DEGREE EARNED

GRADUATE SCHOOL

NUMBER OF YEARS ATTENDED DEGREE EARNED

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WORK HISTORY

(LIST BELOW YOUR LAST (3) EMPLOYERS, STARTING WITH MOST RECENT FIRST)

(1) EMPLOYER

COMPANY		DATES EMPLOYED	
ADDRESS	<small>STREET ADDRESS</small>		
	<small>CITY</small>	<small>STATE</small>	<small>ZIP</small>
PHONE			
JOB TITLE		ENDING SALARY	
RESPONSIBILITIES			
MANAGER NAME/TITLE		OK TO CONTACT?	YES NO
REASON FOR LEAVING			

(2) EMPLOYER

COMPANY		DATES EMPLOYED	
ADDRESS	<small>STREET ADDRESS</small>		
	<small>CITY</small>	<small>STATE</small>	<small>ZIP</small>
PHONE			
JOB TITLE		ENDING SALARY	
RESPONSIBILITIES			
MANAGER NAME/TITLE		OK TO CONTACT?	YES NO
REASON FOR LEAVING			

(3) EMPLOYER

COMPANY		DATES EMPLOYED	
ADDRESS	<small>STREET ADDRESS</small>		
	<small>CITY</small>	<small>STATE</small>	<small>ZIP</small>
PHONE			
JOB TITLE		ENDING SALARY	
RESPONSIBILITIES			
MANAGER NAME/TITLE		OK TO CONTACT?	YES NO
REASON FOR LEAVING			

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REFERENCES

LIST (3) REFERENCES THAT WE MAY CONTACT WHO ARE UNRELATED TO YOU AND HAVE KNOWLEDGE OF YOUR WORK ETHIC, EXPERIENCE, AND ABILITY. (IF THIS IS YOUR FIRST JOB, ACADEMIC REFERENCES ARE ACCEPTABLE) (*REQUIRED)

(1) REFERENCE

NAME			
ADDRESS	<i>STREET ADDRESS*</i>	<i>SUITE/APT.</i>	
	<i>CITY*</i>	<i>STATE*</i>	<i>ZIP*</i>
CONTACT	<i>WORK*</i>	<i>MOBILE</i>	<i>EMAIL</i>
BUSINESS	TITLE		
RELATIONSHIP TO YOU	YEARS KNOWN		

(2) REFERENCE

NAME			
ADDRESS	<i>STREET ADDRESS*</i>	<i>SUITE/APT.</i>	
	<i>CITY*</i>	<i>STATE*</i>	<i>ZIP*</i>
CONTACT	<i>WORK*</i>	<i>MOBILE</i>	<i>EMAIL</i>
BUSINESS	TITLE		
RELATIONSHIP TO YOU	YEARS KNOWN		

(3) REFERENCE

NAME			
ADDRESS	<i>STREET ADDRESS*</i>	<i>SUITE/APT.</i>	
	<i>CITY*</i>	<i>STATE*</i>	<i>ZIP*</i>
CONTACT	<i>WORK*</i>	<i>MOBILE</i>	<i>EMAIL</i>
BUSINESS	TITLE		
RELATIONSHIP TO YOU	YEARS KNOWN		

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SKILLS/GOALS

LIST ANY ADDITIONAL SKILLS, TRAINING, OR EXPERIENCE THAT YOU CAN OFFER INSOURCE

DESCRIBE YOUR CAREER GOALS

JOB APPLICANT CERTIFICATION

(Please read carefully before signing this statement)

I have read and understand the contents of this employment application and am fully competent to complete it. I understand that in accepting this application, InSource is in no way obligated to provide me with employment and that I am not obligated to accept employment if offered.

I certify with my signature below that I have provided true and complete information on this application and in any resume that I may submit related to seeking employment with InSource. I understand that any misrepresentation or falsification of information or material omissions on either this application, resume, or during the pre-employment process may result in my application being rejected, or, may be cause for subsequent dismissal if I am hired.

I also understand that if I am offered employment, the offer is conditioned upon my successful completion of all requirements such as legal employment verification, drug screen, and reference or background check. I understand that my refusal to participate in or provide written consent to any of these requirements will result in the withdrawal of the offer. Similarly, I understand that if I fail to successfully complete any of these requirements, the offer of employment will be revoked.

I further understand that any subsequent offer of employment is conditioned upon my ability to timely provide appropriate documents regarding my identity and legal right to work in the United States.

If I become employed by InSource, I understand my employment is at-will and can be terminated, with or without cause and with or without notice, at any time at the option of myself or InSource. I understand that, other than the President of InSource, no one has the authority to enter into any individual agreement for employment for any specific period of time or to change my at-will status. Only the President of InSource has the authority to make any individual employment agreement and only in writing.

I hereby authorize any of the persons or organizations listed in my application to give all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application, and release all such parties from all liability that may result from furnishing such information to InSource. I authorize InSource to request and receive such information.

SIGNATURE

DATE

X

**ATTACH RESUME
TO THE BACK**