

EMPLOYMENT APPLICATION

Each person working at Apex Supply Company is an associate. An associate is expected to have a positive attitude and pride in his or her work. An associate takes responsibility for his or her work arid demonstrates teamwork with fellow associates.

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religions, sex, national origin, age, marital or veteran status, disability, or the presence of non-job-related medical condition, or handicap, or any other legally protected status.

	Date of Applicat				licatio	on	
Name	Last	First	Middle	_ Social Security N	No		
Address		First	Middle				
Address _	Street		City	State		Zip	
Phone		_ Driver's License N	o			Class	
I unders sufficient assigned to need of may background and door	STATEMENT & AUTHORITY TO RELEASE INFORMATION PLEASE READ THIS STATEMENT CAREFULLY BEFORE YOU COMPLETE THIS APPLICATION I understand that if I am employed, any misrepresentation or omission of material facts on this application is sufficient cause for dismissal. My continued employment will depend on the successful performance of work assigned to me during a new hire period of 90 days and upon the continued successful performance and the further need of my continued employment by Apex Supply Company, in considering my application for employment, may verify the information set forth in this application and obtain additional information relating to my background. I authorize all persons, schools, companies, corporations, credit bureaus, law enforcement agencies and doctors to supply any information concerning my background. Provided state and Federal law permits, I further agree to submit to alcohol and/or drug screening tests and polygraph examinations, where and whenever legal, if requested of me at any time prior to or during my employment.						
Referral:_ Have you	filled an applica	ation or been empl	oyed here be	fore?	/es	No	
If yes, date(s) Do any of your relatives work here? If yes, list name(s)			Y	l'es	No		
Are you c	currently employ	red?	Yes N	ĺo			
Are you o	on lay-off or subj	ject to recall?		[o			
May we c	ontact your pres	ent employer?		О			
•	vailable to work		Part Tim	e			
In case of	accident or eme	ergency, please not	ify				
Name		Ad	dress			Phone	

Do you have any objection to written, drug, and/or alcohol tests, or a post-hiring physical examination as part of your employment?				Yes	No
Are you known to schools/references by another name?				Yes	No
If yes, by what other nam	ne?				
Are you prevented from because of a Visa or Immwill be required upon employment.	lawfully becoming empigration status? Proof of	ployed in this	country	Yes	No
Are you 18 years of age of certificate or a work certificate as			l to submit a birth	Yes	No
Have you been convicted 7 years. Conviction will not nec	•	-	within the last	Yes	No
If yes, explain:					
What foreign languages of		d or write?	Б.		
0 1	Good		Fair		Poor
Speak Read					
Write					
WINC					
Can you travel if a job re	quires it?	Yes	No		
Do you smoke?		Yes	No		
Have you ever had any jo	b-related training?		No		
If yes, please explain:					
List any trade or profession You may exclude memberships what statuses.					
Give name, address, and	•		t related to you:		
1					
2					
3					

EMPLOYMENT EXPERIENCE

List each job held. Start with your present or last job. Include military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, sex, national origin, ancestry, disability, or other protected status.

Employer	From	To	Phone			
Job Title	Address					
Immediate Supervisor	Work Prefe	ormed				
Reason for Leaving	Hourly Rat	e / Salary				
	Start	Final				
	_					
Employer	From	To	Phone			
Job Title	Address					
Immediate Supervisor	Work Pref	formed				
Reason for Leaving		Hourly Rate / Salary				
	Start	Final				
Employer	From	To	Phone			
Job Title	Address	Address				
Immediate Supervisor	Work Pref	Work Preformed				
Reason for Leaving	Hourly Ra	te / Salary				
	Start	Final				

Education					
School Name	Location	Years Completed	Describe Course of Study		

Summarize special skills or qualifications acquired from employment or other experience.

Describe specialized Training. Apprenticeship, Skills, and Extra-Curricular Activities

DRUG CONTROL POLICY AND CONSENT TO TESTING

Apex Supply Company has a vital interest in maintaining safe, healthful, and efficient working conditions for its associates. An associate under the influence of a drug or alcohol on the job may pose serious safety and health risks, not only to the user, but to all those who work with or otherwise come into contact with the user. Studies show drug and alcohol use in the workplace may be the single greatest factor responsible for industrial accidents and injuries, declining productivity, employee theft, and low employee morale.

Therefore, Apex Supply Company will require, as one of the steps in the hiring process, that all otherwise qualified applicants for employment with Apex Supply Company consent and submit to testing for illegal and legal incapacitating drug use. "Illegal drugs" includes any drug that is not legally obtainable or which is legally obtainable but has not been legally obtained and prescription drugs not being used for prescribed purposes including marijuana. "Legal drugs" includes prescribed drugs and over-the-counter drugs which has been legally obtained and are being used for the purpose for which they were prescribed or manufactured, and in such doses as prescribed and/or suggested by the manufacturer. This includes alcohol.

Refusal to consent a participate in such drug testing will automatically disqualify the applicant from further hiring consideration. Applicant testing positive for the presence of drugs in their bodies will automatically be disqualified from further hiring consideration.

I hereby give my consent to Apex Supply Company to administer a drug test consisting of the taking of urine or blood, or any other medically recognized test designed to detect traceable amounts of drugs in the body and I agree to be tested within 48 hours of the time requested to be tested. The medical facility is authorized to release the results of the test to Apex Supply Company who is authorized to communicate the test results internally as it deems appropriate.

AGREEMENT

I certify that answers given herein are true and complete to the best of my knowledge and understand falsification or omissions in this application in any detail is grounds for disqualification from further consideration or for dismissal from employment at the time Apex Supply Company discovers the mission or falsification.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

In the event of employment, I agree to abide by all rules and regulations of Apex Supply Company.

I hereby acknowledge that nay employment relationship with Apex Supply Company is an "at will" nature, which means that the Associate may resign at any time and Apex Supply Company may discharge Associate at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by any conduct unless such change is specifically acknowledged in writing by the chief executive of Apex Supply Company.

Date:		_		
-	Signature of Applicant			
		AGREEN	MENT	
medical history and other	related matters a schools, credit b	is may be nec	s of my personal, employment, financial or ressary in arriving at an employment decision. I persons from all liability in responding to inquires	
information from law enfo concerning my backgroun	orcement agencie d, character and	es, and others qualification	lly run credit bureau reports, request current s to release and furnish whatever information s.	
Date:		_	Signature of Applicant	
	For Pers	sonnel Depai	rtment Use Only	
Arrange Interview	Yes	No	Date	
Remarks				
Employed	Yes	No	Date of Employment	
Job Title	Hourly Ra	ate / Salary _	Department	