

THE RESOURCE EXCHANGE, INC.
APPLICATION FOR EMPLOYMENT

418 S Weber Street.
 Colorado Springs, CO 80903
 (719) 380-1100

The Resource Exchange is an Equal Opportunity Employer

NOTICE OF NON-DISCRIMINATION

Services and employment at The Resource Exchange, Inc. are provided without discrimination on the basis of, race, color, national origin, sex, religion, age, veteran status, or disability. No question on this application is intended to secure information to be used for such discrimination.

Anyone having any concern regarding the provision of services or employment on the basis of race, color, national origin, sex, religion, age, veteran status, or disability may contact the Equal Employment Opportunity/Affirmative Action Coordinator at (719) 380-1100.

Each question should be fully and accurately answered. No action can be taken on this application until all questions have been answered. Use blank paper if you do not have enough room on this application. PLEASE PRINT.

JOB DATA

Position Applying For: _____ Date Available: _____

Type of Employment Sought: Full-Time _____ Temporary _____ Part-Time _____

Have you ever filed an application with us before? Yes _____ No _____ If yes, when? _____

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

P	Last Name	First	Middle	Date
	_____			_____
E	Street Address			Home Phone
	_____			() _____
R	City, State, Zip			Message Phone
	_____			() _____
S	Are you 18 years or older? _____			
	If less than 18 years of age, can you provide proof of your eligibility to work? Yes _____ No _____			
O	All applicants who are offered employment must provide documents which establish their identity and employment eligibility for authorization to work in the United States. Can you legally work in this country? Yes _____ No _____			

N	Do you have a valid Driver's License? No _____ Yes _____ State _____ Class _____			
	List all traffic citations & accidents in the last three- (3) years. (Motor Vehicle Record will be obtained upon employment.)			
A	_____			
	Have you ever been convicted of any crime? No _____ Yes _____			
L	If yes, give details including dates, charges, and disposition. Convictions are not an absolute bar to employment. (Consideration is given to the offense and its relationship to the position for which you are applying.) (Criminal background report will be obtained upon employment.)			

L	Are you currently employed? Yes _____ No _____ May we contact your current employer? Yes _____ No _____			

E D U C A T I O N	High School	College	Trade School
	Name	_____	
Location	_____		
Years Completed	1 2 3 4	1 2 3 4 +	1 2 3 4 +
Diploma/Degree	Yes/No	Type: _____	Type: _____
Course of Study	_____		
Describe any specialized training:	_____		

S K I L L S	Computer	Office	Other
	Data processing/Word processing equipment and/or computer software you can operate: (*Note skill Level as: beginner, intermediate, or expert)	Type _____ WPM Shorthand _____ WPM Dictaphone _____ WPM	Light or heavy motor vehicle equipment you can operate (if applicable): _____
_____	Office machines you can operate: _____	_____	
_____	_____	Tools and machines you can operate (if applicable): _____	
Other computer experience/knowledge: _____	_____	_____	
_____	_____	_____	
_____	_____	_____	

M I L I T A R Y	Have you ever served on active duty in the U.S. Armed Forces? No ____ Yes ____ Dates: _____ To _____
	Branch _____ Primary Duties _____

O T H E R	Additional work experience (with persons with developmental disabilities, if any), including volunteer work/dates:

_____ Past Employer	_____ Job Title
_____ Street Address/Mailing Address	_____ Name of Supervisor/Title
City State Zip	Date Started Date Ended
() _____ Telephone Number Starting Pay	_____ Ending Pay
Specific Duties: _____ _____	
Reason for Leaving: _____	

REFERENCES			
Include individuals familiar with your work ability. Do not include relatives. Three references are required.			
Name	Address	Telephone Number	Years Known
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

PLEASE READ BEFORE SIGNING APPLICATION

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize and agree to cooperate in a thorough investigation of all statements made herein and other matters relating to my background and qualifications. I understand that any investigation conducted may include a request for employment and educational history, credit reports, consumer reports, investigative consumer reports, driving record, and criminal history. I authorize any person, school, current and former employer, consumer reporting agency, and any other organization or agency to provide information relevant to such investigation and I hereby release all persons and corporations requesting or supplying information pursuant to such investigation from all liability or responsibility to me for doing so. I understand that I have the right to make a written request within a reasonable period of time for complete disclosure of the nature and scope of any investigation. I further authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the job for which I am being considered or any future job in the event that I am hired.

I understand that compliance with the Company's Policies and Procedures is a condition of my employment.

I understand I will be required to successfully pass a drug screening examination. I hereby consent to a pre-and/or post employment drug screen as a condition of my employment.

I UNDERSTAND THAT THIS APPLICATION OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE A CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements.

Signature: _____ Date: _____