



# SHAMIR

## Application for Employment

Date of Application \_\_\_\_\_

Name (Last Name, First Name, Middle Initial) \_\_\_\_\_

Present Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Position Applied For \_\_\_\_\_

How did you hear about this job? \_\_\_\_\_

Desired Salary \_\_\_\_\_

Have you ever worked for this company before? YES  NO

Are you able to perform the essential functions of the position for which you are applying, either with or without reasonable accommodations? YES  NO

Do you have the legal right to be employed in the U.S.? (Proof of identity and legal authority to work in the U.S. is a condition of employment) YES  NO

Are you at least 18? (Proof of age and work permits may be required prior to hiring) YES  NO

Do you have a reliable means of transportation to and from work? YES  NO

If driving is a requirement of the job for which you are applying, do you have a current, valid driver's license? (If driving is a requirement of the job, continued employment is contingent upon your maintaining a current valid driver's license.) YES  NO

Shamir Insight, Inc. (the "Company") is an equal opportunity/affirmative action employer. All qualified applicants will be considered without regard of age, race, color, sex, religion, nation of origin, marital status, ancestry, citizenship, veteran status, sexual orientation or preference or physical or mental disability.

# Employment / Work Experience

Please list all of your jobs in the past five years beginning with your current or most recent employer.  
If applicable, you may list work performed on a voluntary basis. If additional pages are needed, please attach.

Company		May we contact this employer?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Address	City	State	Telephone Number		
Employed From	to	Starting Pay	Ending Pay		
Last Position(s) Held		Title			
Supervisor's Name and Position					
Describe your duties					
Reason for Leaving?					

Company		May we contact this employer?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Address	City	State	Telephone Number		
Employed From	to	Starting Pay	Ending Pay		
Last Position(s) Held		Title			
Supervisor's Name and Position					
Describe your duties					
Reason for Leaving?					

Company		May we contact this employer?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Address	City	State	Telephone Number		
Employed From	to	Starting Pay	Ending Pay		
Last Position(s) Held		Title			
Supervisor's Name and Position					
Describe your duties					
Reason for Leaving?					

## Employment / Work Experience

Company		May we contact this employer?		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Address	City	State	Telephone Number		
Employed From	to	Starting Pay	Ending Pay		
Last Position(s) Held		Title			
Supervisor's Name and Position					
Describe your duties					
Reason for Leaving?					

Please identify and explain all periods of unemployment during the last five years.

From	To	Reason for Unemployment

## Professional References

Name	Address	Telephone	Years Known

I hereby certify that the information contained in this application form is true and correct to the best of my knowledge and agree to have any of the statements checked by the Company unless I have indicated to the contrary. I authorize the references listed above, as well as all other individuals whom the Company contacts, to provide the Company any and all information concerning my previous employment and any other pertinent information that they may have. Further, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to the Company as well as from the use or disclosure of such information by the Company or any of its agents, employees or representatives. I understand that any misrepresentation, falsifications or material omission of information on this application may result in my failure to receive an offer of employment or, if I am hired, my immediate dismissal from employment.

## Education

High School		
Address		
City	State	Telephone Number
Years Attended	Degree/Diploma	
Courses or Major		

High School		
Address		
City	State	Telephone Number
Years Attended	Degree/Diploma	
Courses or Major		

High School		
Address		
City	State	Telephone Number
Years Attended	Degree/Diploma	
Courses or Major		

Specialized technical skills (i.e. computer programmer/language, equipment operation, special tools or machines used)

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## General Information

Date available to start: \_\_\_\_\_ Full-time or Part-time: \_\_\_\_\_

		Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Days and hours Available to work	From To							

Are you willing to work overtime? Yes  No

What are your hobbies, special interests and favorite activities?  
(You may omit those indicating race, color, religion, sex, nationality, ancestry, age, or the existence of a disability.)

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Have you ever been convicted of a crime other than a routine traffic violation? Yes  No

Have you ever pleaded nolo contendere to any crime? Yes  No

(NOTE: A conviction is not an automatic bar to employment. Each case will be considered on its own merits.)

If yes, please explain. State charge, court date, and disposition of case:

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In consideration of my employment, I agree to conform to the rules and standards of the Company. I further agree that my employment and compensation can be terminated at will, with or without cause, and with or without notice, at any time, either at my option or the option of the Company. I understand that no employee or representative of the Company, other than its president, has the authority to enter into any agreement of employment for any specified period of time, or to make any express or implied agreement contrary to the foregoing. Further, the president of the Company may not alter the at-will nature of the employment relationship or enter into any employment agreement for a specified time unless the president and applicant both sign a written agreement that clearly and expressly specifies the intent to do so. I agree that this shall constitute a final and fully binding integrated agreement with respect to the at-will nature of my employment relationship and that there are no oral or collateral agreements regarding this issue. I also understand that all offers of employment are conditioned on the Company's receipt of satisfactory responses to reference requests and the provision of satisfactory proof of applicant's identity and legal authority to work in the United States.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_