



Application for Employment

King Machine fully subscribes to the principles of Equal Employment Opportunity. It is our policy to provide employment, compensation, and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, age, sex, veteran status, genetic information, disability, or any other basis prohibited by federal, state or local law. As an Equal Opportunity Employer, we intend to comply fully with applicable federal, state and/or local employment laws and the information requested on this application will only be used for purposes consistent with those laws. To the extent required by applicable law,

POSITION APPLIED FOR: _____ DATE: _____

PERSONAL DATA

Name: _____
Last Middle First

Street Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email: _____

If you are under 18 years of age, please specify your age: _____. This information will be used only for child labor law purposes).

Desired pay rate? \$ _____

Are you available to work any shift? Yes No

If no, please explain: _____

Are you available to work overtime, if required? Yes No

Would you be available to work weekends when needed? Yes No

When will you be able to start work? _____

How did you learn of King Machine? _____

Have you ever applied or worked for King Machine before? Yes No

If yes, provide dates: _____

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

Will you now or in the future require sponsorship for employment visa status? (e.g., H-1B visa status) Yes No

Have you ever been discharged or asked to resign from employment? Yes No

If yes, explain: _____

MILITARY (Complete only if you served in the military.)

Branch of Service: _____ Number of Years /Months of Service: _____

Rank at Discharge; _____ Date of Discharge: _____

Describe any military skills, training or experience you believe are relevant to the job you applied for:

EDUCATION

Describe any educational degrees, skills, training or experience you believe are relevant to the job applied for:

Name, City and State of Educational Institution	Graduated		If no, Degree Credits Earned	Type of Degree Received or Expected	Major	Minor
	Yes	No				
High School						
College or University						
Technical/GED						
Licenses/ Certification/Other						

PROFESSIONAL REFERENCES (Please list three individuals unrelated to you with whom you have worked who know your qualifications for this position.)

NAME	ADDRESS	PHONE	RELATIONSHIP

EMPLOYMENT HISTORY:

Please complete for all full-time or part-time employment beginning with most recent employer. You may include as part of your employment history any verified work performed on a volunteer basis. All applicants should start with their most recent job, include military assignments and voluntary employment (A separate sheet may be attached.) You must explain any gaps in your employment history.

Company Name: _____ Telephone: _____
Address: _____
Name of Supervisor: _____ May we contact: Yes No
Dates Employed: From: _____ To: _____ Ending pay rate \$ _____
State job titles and describe job duties: _____
Reason for leaving: _____

Company Name: _____ Telephone: _____
Address: _____
Name of Supervisor: _____ May we contact: Yes No
Dates Employed: From: _____ To: _____ Ending pay rate \$ _____
State job titles and describe job duties: _____
Reason for leaving: _____

Company Name: _____ Telephone: _____
Address: _____
Name of Supervisor: _____ May we contact: Yes No
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Company Name: _____ Telephone: _____
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State job titles and describe job duties: _____
Reason for leaving: _____

APPLICANT'S ACKNOWLEDGMENT

I certify that the answers given herein and during the entire application process (including but not limited to information provided in resumes, attachments to this application, interviews or otherwise (if applicable)) are true and complete to the best of my knowledge.

I understand that any misrepresentations, omissions of facts or incomplete answers during the application process may disqualify me from further consideration for employment. I further understand that, if employed, any misrepresentations or omissions of facts during the application process may be cause for my dismissal at any time without prior notice.

I consent to and authorize King Machine to contact my former employers, references, and any and all other persons and organizations for information bearing upon my qualifications for employment.

I further authorize the listed employers, schools and personal references to give King Machine any and all information about my previous employment and education, along with any other pertinent information they may have and hereby waive any actions which I may have against King Machine for providing a good faith reference.

I EXPRESSLY AGREE AND UNDERSTAND THAT, IF EMPLOYED, MY EMPLOYMENT IS NOT FOR A SPECIFIC TERM, IS BASED ON MUTUAL CONSENT AND MAY BE TERMINATED BY ME OR KING MACHINE WITH OR WITHOUT NOTICE OR CAUSE AT ANY TIME. I FURTHER UNDERSTAND THAT NO ORAL PROMISE, EMPLOYER POLICY, CUSTOM, BUSINESS PRACTICE OR OTHER PROCEDURE (INCLUDING THE BASIC EMPLOYMENT POLICIES, PERSONNEL HANDBOOK OR ANY PERSONNEL MANUALS) CONSTITUTES AN EMPLOYMENT CONTRACT OR MODIFICATION OF THE AT-WILL EMPLOYMENT RELATIONSHIP BETWEEN ME AND KING MACHINE.

I understand that I may be required to qualify for employment based on additional employment criteria. For example, I may be required to take job-related tests; take a driver's examination or take a pre-employment drug test. If I am offered employment or start work before any required test is completed, I understand **that my employment is contingent on a satisfactory result on all required tests**. I authorize King Machine to release the results of my pre-employment drug/alcohol test, any information on this application and any relevant information about me to each other for whom I have applied for employment, and release King Machine, and its clients from any and all claims related to the lawful release of this information. I further authorize the release of any background check results and of any drug/alcohol test to any state or federal authority requesting such information and in response to a valid subpoena or other legal document.

Print Name _____

Signature _____

Date: _____