



# SUMMUS INDUSTRIES

## EMPLOYMENT APPLICATION

**EQUAL OPPORTUNITY EMPLOYER.** It is our policy to abide by all Federal and State laws prohibiting employment discrimination solely on the basis of a person's race, color, creed, national origin, religion, age (over 40), sex, marital status, or physical or mental disability, except where a reasonable, bona fide occupational qualification exists.

PLEASE TYPE OR PRINT IN INK.

Today's Date \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_  
Day Phone (\_\_\_\_) \_\_\_\_\_

Social Security # (Optional) \_\_\_\_\_  
How Long? \_\_\_\_\_  
State/Zip \_\_\_\_\_  
Home Phone (\_\_\_\_) \_\_\_\_\_

Position for which you are applying \_\_\_\_\_  
Check the following options you would consider \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Temporary  
If part time, specify hours or days \_\_\_\_\_  
What is your minimum salary requirement? \_\_\_\_\_ Date available for work \_\_\_\_\_  
Do you have any commitments to another employer that might affect your employment with us? \_\_\_\_\_

### EDUCATION AND TRAINING

|                 | School Name | City and State | Degree/<br>Major Course of Study | Degree Received  |
|-----------------|-------------|----------------|----------------------------------|--|
| High School     |             |                |                                  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| College         |             |                |                                  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Graduate School |             |                |                                  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Trade School    |             |                |                                  | <input type="checkbox"/> Yes <input type="checkbox"/> No |

List any other education, training, special skills or certificates/licenses that you possess related to the job \_\_\_\_\_

List any machines, equipment, or software programs on which you are qualified and experienced in operating \_\_\_\_\_

List any languages that you fluently speak. \_\_\_\_\_ Read/write \_\_\_\_\_

Do you have a valid driver's license in this state? \_\_\_\_\_ Yes \_\_\_\_\_ No

Military experience? \_\_\_\_\_ Yes \_\_\_\_\_ No If yes, what branch? \_\_\_\_\_

Rank at separation \_\_\_\_\_

### GENERAL INFORMATION

Can you, after employment, submit verification of your legal right to work in the U. S.? Yes No

Are you 16 years old or over? \_\_\_\_\_ Yes \_\_\_\_\_ No If under 18, state age \_\_\_\_\_

**GENERAL INFORMATION (continued)**

During the last ten years, have you ever been convicted of, plead guilty to, or received probation, deferred adjudication, or any other type of alternative method of supervision or correction for a misdemeanor, having a penalty of imprisonment or a fine of over \$500, or a felony? (Answering yes is not an automatic bar to employment but will be considered in relation to specific job requirements.) \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, explain \_\_\_\_\_

Can you perform the essential functions of the job? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you require any accommodation to perform the essential functions of the job? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, explain \_\_\_\_\_

**EMPLOYMENT HISTORY**

List all work experience beginning with the present or most recent job (use back of application, if necessary).

NAME OF EMPLOYER \_\_\_\_\_ TYPE OF BUSINESS \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DATES EMPLOYED (FROM – TO) \_\_\_\_\_ TITLE \_\_\_\_\_

( ) \_\_\_\_\_

NAME AND TITLE OF SUPERVISOR \_\_\_\_\_ TELEPHONE NUMBER \_\_\_\_\_

MAY WE CONTACT? \_\_\_\_\_ YES \_\_\_\_\_ NO WAS EMPLOYMENT? \_\_\_\_\_ PART TIME \_\_\_\_\_ FULL TIME

BRIEF DESCRIPTION OF DUTIES \_\_\_\_\_

REASON FOR LEAVING \_\_\_\_\_ LAST SALARY \_\_\_\_\_

NAME OF EMPLOYER \_\_\_\_\_ TYPE OF BUSINESS \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DATES EMPLOYED (FROM – TO) \_\_\_\_\_ TITLE \_\_\_\_\_

( ) \_\_\_\_\_

NAME AND TITLE OF SUPERVISOR \_\_\_\_\_ TELEPHONE NUMBER \_\_\_\_\_

MAY WE CONTACT? \_\_\_\_\_ YES \_\_\_\_\_ NO WAS EMPLOYMENT? \_\_\_\_\_ PART TIME \_\_\_\_\_ FULL TIME

BRIEF DESCRIPTION OF DUTIES \_\_\_\_\_

REASON FOR LEAVING \_\_\_\_\_ LAST SALARY \_\_\_\_\_

NAME OF EMPLOYER \_\_\_\_\_ TYPE OF BUSINESS \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DATES EMPLOYED (FROM – TO) \_\_\_\_\_ TITLE \_\_\_\_\_

( ) \_\_\_\_\_

NAME AND TITLE OF SUPERVISOR \_\_\_\_\_ TELEPHONE NUMBER \_\_\_\_\_

MAY WE CONTACT? \_\_\_\_\_ YES \_\_\_\_\_ NO WAS EMPLOYMENT? \_\_\_\_\_ PART TIME \_\_\_\_\_ FULL TIME

BRIEF DESCRIPTION OF DUTIES \_\_\_\_\_

REASON FOR LEAVING \_\_\_\_\_ LAST SALARY \_\_\_\_\_

**EMPLOYMENT HISTORY (continued)**

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|  |   |       |     |
|--|---|-------|-----|
| NAME OF EMPLOYER   | TYPE OF BUSINESS  |       |     |
| ADDRESS  | CITY  | STATE | ZIP |
| DATES EMPLOYED (FROM – TO)                                       | TITLE<br>( )  |       |     |
| NAME AND TITLE OF SUPERVISOR<br>MAY WE CONTACT? ____ YES ____ NO | TELEPHONE NUMBER<br>WAS EMPLOYMENT? ____ PART TIME ____ FULL TIME |       |     |
| BRIEF DESCRIPTION OF DUTIES                                      |   |       |     |
| REASON FOR LEAVING   | LAST SALARY   |       |     |

**BUSINESS REFERENCES** (List three individuals, in addition to listed employment references, known to you for at least three years.)

| NAME     | OCCUPATION/ASSOCIATION | PHONE |
|----------|------------------------|-------|
| 1. _____ | _____                  | _____ |
| 2. _____ | _____                  | _____ |
| 3. _____ | _____                  | _____ |

Person to be notified in case of emergency:

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

Please include any other information you think would be helpful to us in considering you for employment, such as additional work experience, articles/books published, activities, honors received, etc. (You may omit all information that would indicate age, sex, sexual orientation, race, religion, color, national origin, or disability.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**AGREEMENT (Please read the following statement carefully.)**

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize all persons listed above (and on the accompanying resume, if any) to give Summus Industries, Inc. (Summus) any and all information concerning my previous employment and education and any pertinent information they may have, personal or otherwise, and release all parties, such persons and Summus Industries from liability for any damage that may result from furnishing same to Summus Industries.

If employed by Summus Industries, I agree to abide by the policies and procedures of Summus Industries. I further understand that my employment can be terminated, with or without cause or notice, at any time, at the discretion of Summus Industries or myself. I further understand that no manager or representative of Summus Industries other than the President of Summus Industries has any authority to enter into any agreement, oral or written, for a term of employment or to make any assurance or promise of continued employment.

I understand and agree that I may be required to take a drug and alcohol screening test. I hereby give my voluntary consent for a blood and/or urine sample to be collected from me and submitted for testing. I also consent to the release of the test result to Summus Industries for its use. I understand that any positive drug or alcohol result may preclude my employment. I also agree to submit to a criminal background check as a condition of employment and grant Summus Industries permission to conduct such an investigation. I understand that the discovery of any felony conviction charge may result in my not being considered for employment or termination of my employment.

Signature \_\_\_\_\_ Date \_\_\_\_\_