



We're here for you

UNITED CONSULTING

APPLICATION FOR EMPLOYMENT

PLEASE READ:

Thank you for your interest in a career with United Consulting. We appreciate your taking the time to complete this application. All applicants will be given equal consideration regardless of race, age, sex, disability, religion and national origin. United Consulting's policy requires that all persons interested in employment complete a written application for the position in which they are interested. Individuals will not be considered applicants if they exclude the following information: 1-the position applied for; 2-information required by law, including social security number and authorization to work in the United States; 3-a complete employment history including the name of the employer, dates of employment, and reason for leaving; and 4-signature of applicant.

PERSONAL INFORMATION

Position Applying For:		Date:	
Last Name:	First Name:	Middle:	
Home Telephone:	Business Telephone:	Cell Phone:	
Email Address:		Social Security No:	
Present Street Address:		How Long At Present Address:	
City:	State:	Zip:	
Previous Street Address:		How Long At Previous Address:	
City:	State:	Zip:	
Type of employment desired:	<input type="checkbox"/> Part Time	<input type="checkbox"/> Full Time	<input type="checkbox"/> Temporary
When will you be available to begin work?	Pay Expected:		
Have you ever applied for employment with us?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, Month & Year:	
Are you willing to work overtime?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you legally eligible for employment in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you currently authorized to work for all employers in the United States on a full time basis?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Will you now or in the future, require employer sponsorship to remain legally eligible for employment? If yes, please explain.	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Are you at least 18 years of age?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you have a valid driver's license?	<input type="checkbox"/> Yes <input type="checkbox"/> No	What State: Driver's License No:	
State names of relatives and friends working for us:			
Have you been convicted of a crime in the past 10 years, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by a court? If yes, please describe in full.		<input type="checkbox"/> Yes <input type="checkbox"/> No (A yes answer does not automatically preclude you from consideration.)	

UNITED CONSULTING

625 HOLCOMB BRIDGE ROAD, NORCROSS, GEORGIA 30071

TEL: (770) 209-0029 ♦ FAX: (770) 582-2900 ♦ E-MAIL: united@unitedconsulting.com ♦ www.unitedconsulting.com

EDUCATIONAL BACKGROUND

SCHOOL	SCHOOL NAME, CITY & STATE	COURSE OF STUDY	NO. OF YEARS ATTENDED	DID YOU GRADUATE?	TYPE OF DEGREE/ DIPLOMA
COLLEGE UNDER-GRADUATE (ASSOC/BACHELOR)				<input type="checkbox"/> YES <input type="checkbox"/> NO	
COLLEGE GRADUATE (MASTERS/PHD)				<input type="checkbox"/> YES <input type="checkbox"/> NO	
BUSINESS TRADE/ TECHNICAL				<input type="checkbox"/> YES <input type="checkbox"/> NO	
HIGH SCHOOL				<input type="checkbox"/> YES <input type="checkbox"/> NO	

List any memberships in professional, trade, business or civic associations. *(Exclude those, which would reveal race, religion, national origin, age, disability, ancestry, or other protected status.)*

List any other special training or skills. (Languages, Computers, Machine operation, etc.)

MILITARY

Did you serve in the U. S. Armed Forces?

Yes No

What Branch?

Describe any training relevant to the position for which you are applying?

Please write a paragraph or two explaining why you would like to work for United Consulting. Why should United Consulting hire you? *(Please limit to 50 words.)*

EMPLOYMENT HISTORY

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer.

Employer		Telephone
Address		Dates Employed From: _____ To: _____
Name of Supervisor	Your Job Title	Weekly Pay Start: _____ Final: _____
Description:		Reason For Leaving:

Employer		Telephone
Address		Dates Employed From: _____ To: _____
Name of Supervisor	Your Job Title	Weekly Pay Start: _____ Final: _____
Description:		Reason For Leaving:

Employer		Telephone
Address		Dates Employed From: _____ To: _____
Name of Supervisor	Your Job Title	Weekly Pay Start: _____ Final: _____
Description:		Reason For Leaving:

Employer		Telephone
Address		Dates Employed From: _____ To: _____
Name of Supervisor	Your Job Title	Weekly Pay Start: _____ Final: _____
Description:		Reason For Leaving:

Employer		Telephone
Address		Dates Employed From: _____ To: _____
Name of Supervisor	Your Job Title	Weekly Pay Start: _____ Final: _____
Description:		Reason For Leaving:

We may contact the employers listed above unless you indicate those you do not want us to contact.

DO NOT CONTACT	REASON
1.	
2.	
3.	

PLEASE READ AND SIGN:

Drug-Free Workplace – All job applicants at United Consulting will undergo testing for the presence of illegal drugs as a condition of employment. Any applicant with a confirmed positive will be denied employment. Applicants will be required to submit voluntarily to a urinalysis test at a laboratory chosen by United Consulting, and by signing a consent agreement will release United Consulting from liability. If the physician, official, or lab personnel have reasonable suspicion to believe that the applicant has tampered with the specimen, the applicant will not be considered for employment. United Consulting will not discriminate against applicants for employment because of past history of drug abuse. It is the current abuse of drugs, preventing employees from performing their jobs properly, that United Consulting will not tolerate. Individuals who have failed a pre-employment test may initiate another inquiry with United Consulting after period of not shorter than six (6) months; but they must present themselves drug-free as demonstrated by urinalysis or other test selected by United Consulting. United Consulting has a “No smoking Policy” in all of our workplaces.

I hereby certify that the information contained in this application is true and correct to the best of my knowledge and agree to have any of the statements checked by United Consulting, unless I have indicated to the contrary. If United Consulting decides to engage an investigation consumer reporting agency or other investigative entity to report on my credit, reference, qualifications or personal history, I authorized you to do so. Furthermore, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to United Consulting, as well as from the use or disclosure of such information by United Consulting or any of its agents, co-workers, or representatives. I understand that any misrepresentation, falsification, or material omission of information on this application may result in my failure to receive an offer, or if I am hired, my dismissal from employment. In consideration of my employment, I agree to conform to the rules and standards of United Consulting amended from time to time in its discretion. **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 at the option of United Consulting.** I also acknowledge that no written or oral promise or contractual obligation of employment for a specified term is effective unless expressly set forth in a document signed by an officer of United Consulting. Perspective employees of United Consulting will receive consideration for employment without discrimination because of race, creed, gender, age, national origin, disability, or any other basis prohibited by local, state, or federal law. This application is current for only sixty (60) days. At the conclusion of this time, if I have not heard from the employer and still want to be considered for employment, it will be necessary for me to fill out a new application.

SIGNATURE OF APPLICANT

DATE

THE INFORMATION BELOW TO BE COMPLETED BY UNITED CONSULTING:

EDUCATION CHECK

SCHOOL	RESULTS

REFERENCE CHECK

COMPANY/PERSON CONTACTED	RESULTS
1. 	
2. 	
3. 	

REPORTS AND TEST RESULTS

REPORT OR TESTS	SCORE	ANALYSIS/COMMENTS	DECISION
MVR/CRIMINAL HISTORY			
WRITTEN TEST			

INTERVIEW RESULTS

Set Up Interview? Yes No **Interviewer(s):**

1st Interview		Comments:
Date:	Day:	
Time:	Arrival Time:	
2nd Interview		
Date:	Day:	
Time:	Arrival Time:	

HIRING INFORMATION:

Start Date:	Salary: \$	Per	Dept:
TITLE:		SUPERVISOR:	