

EMPLOYMENT APPLICATION

Electronics Research, Inc. (ERI) is an equal opportunity employer. ERI does not discriminate in employment with regard to race, color, religion, national origin, citizenship status, ancestry, age, sex, sexual orientation, marital status, physical or mental disability, military status or any other characteristic protected by law.

PERSONAL INFORMATION

Incomplete information could disqualify you from further consideration. Please complete all fields.

Name _____ Date _____

Address _____

Email _____

Home Phone # _____ Mobile Phone # _____

Are you eligible to work in the US? _____ Yes _____ No

Are you at least 18 years or older? (If no, you may be required to provide authorization to work) _____ Yes _____ No

Have you ever been terminated or asked to resign by an employer? _____ Yes _____ No

If yes, please provide company names and details. _____

Can you work any shift? _____ Yes _____ No If no, explain: _____

Can you work overtime, including weekends? _____ Yes _____ No

Are you able to perform the essential functions of the job for which you are applying with or without a reasonable accommodation? _____ Yes _____ No

EMPLOYMENT DESIRED

Date you can start _____ Hourly Rate/Salary desired _____

Position desired _____

Are you currently employed? _____ Yes _____ No

If yes, may we contact your current employer? _____ Yes _____ No

REFERRAL SOURCE

How did you hear about us? _____ Walk In _____ Advertisement _____ Referral _____ Other

Have you ever worked at this company before?

_____ Yes _____ No Explain _____

Do you know anyone who works for our company? _____ Yes _____ No If yes, who? _____

EDUCATION	Name and Location of School	Degree	Subjects studied/Major
High School			
College or University			
Trade, Business, or Correspondence School			

EMPLOYMENT HISTORY Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backward in time. *Incomplete information could disqualify you from further consideration.*

From		To		Employer		Phone	
Job Title				Address			
Immediate supervisor and title				Summarize the nature of work performed and job responsibilities			
Reason for leaving							
From		To		Employer		Phone	
Job Title				Address			
Immediate supervisor and title				Summarize the nature of work performed and job responsibilities.			
Reason for leaving							
From		To		Employer		Phone	
Job Title				Address			
Immediate supervisor and title				Summarize the nature of work performed and job responsibilities.			
Reason for leaving							
From		To		Employer		Phone	
Job Title				Address			
Immediate supervisor and title				Summarize the nature of work performed and job responsibilities.			
Reason for leaving							

Do you have any special skills, experience, and/or training that would enhance your ability to perform the position applied for? If yes, explain.

REFERENCES

Name three (3) persons not related to you, whom you have known for at least three (3) years.

Name	Address, Phone, Email	Company	Years Acquainted
1			
2			
3			

Please read carefully before signing.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for ERI to hire me. If I am hired, I understand that either ERI or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of ERI has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to ERI true and complete information on this application. No requested information has been concealed. I authorize and understand that an investigative report may be generated on me that may include, but not limited to, information as to my character, work history, criminal history records from any criminal justice agency in any or all federal, state and county jurisdictions, state Department of Motor Vehicle/Driver's License Records, education records including transcripts, and military records (including Social Security Administration and the Immigration and Naturalization Service).

I understand if any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Date: _____ Signature: _____

THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE ABOVE.