



## INSTRUCTIONS:

- Please detach this instruction page prior to giving the application form to the applicant.
- **Please note that we generally advise against making changes to the application template and therefore are unable to make any changes on your behalf. This form should not be considered legal advice. Any changes made should be reviewed by your counsel.**
- This employment application can be used by applicants for any position within your company.

## CRIMINAL AND ADDITIONAL DRIVER RECORD INFORMATION SUPPLEMENT

### INSTRUCTIONS:

- The laws for use of this information vary by state. It is recommended that all decision-making based on criminal convictions be individualized and job-related.
- Location specific caveats regarding criminal conviction inquiries are noted below. Please review the information for your location, and contact your Human Resource Business Partner for further guidance. If you will not be asking for conviction information, please remove this supplement prior to asking the applicant to complete the employment application.
- **Massachusetts:** The state generally prohibits employers from inquiring in an “initial written application form” about an applicant’s criminal history. Additional information is available on the Massachusetts Commission Against Discrimination’s Website which can be found by [clicking here](#). Two narrow exceptions permit questions about criminal history if a federal or state regulation (1) disqualifies the applicant from employment in the open position based on a criminal conviction; or (2) bars the employer from hiring for one or more positions an individual with a criminal conviction. Note that we recommend that you contact your Human Resources Business Partner for guidance if you believe one of the exceptions may apply to applicants. If one of the exceptions applies to your Company then check off the box located in the instructions for Massachusetts applicants.
- **Philadelphia:** Employers with 10 or more employees within the city of Philadelphia are prohibited from requiring applicants to disclose their criminal history until after the employer accepts the employment application and conducts the first telephone or in-person employment interview.

## APPLICATION SUPPLEMENT FOR COMMERCIAL MOTOR VEHICLE DRIVER POSITIONS:

- A separate application supplement for commercial motor vehicle driver positions subject to U.S. DOT regulations along with a form template to request DOT required safety performance history from previous employers is available on FormSource.

# EMPLOYMENT APPLICATION

(PLEASE PRINT AND COMPLETELY ANSWER ALL QUESTIONS)

Our company ("Company") 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. In accordance with requirements of the Americans with Disabilities Act and applicable state laws, it is our policy to provide reasonable accommodation upon request during the application process to eligible applicants in order that they may be given a full and fair opportunity to be considered for employment. As an Equal Opportunity Employer, we intend to comply fully with applicable federal and State 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, The Company maintains a smoke- free workplace. Note pages 6-8 of this application may be intentionally omitted.

Applicants for positions in Rhode Island please note that the Company and ADP TotalSource, our Professional Employer Organization are subject to Chapters 29-38 of Title 28 of the General Laws of Rhode Island and are therefore covered by the state's workers compensation law.

COMPANY: \_\_\_\_\_

POSITION APPLIED FOR: \_\_\_\_\_ DATE: \_\_\_\_\_

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## PERSONAL DATA

Salary expectations: \_\_\_\_\_

Name: \_\_\_\_\_  
Last Middle First

Street Address: \_\_\_\_\_

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

Telephone: \_\_\_\_\_

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

Are there any days, shifts or hours you will not work?  Yes  No

If yes, please explain: \_\_\_\_\_

Are you available for out of town work?  Yes  No

Will you work overtime, if required?  Yes  No

When will you be able to start work? \_\_\_\_\_

Have you ever been found at fault in a civil action for an intentional tort (intentional commission of a wrongful act)?  **Yes**  **No**

Note: Answering "yes" does not automatically exclude you from further consideration for the position.

If yes, include nature of the intentional tort and the disposition of the action: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How did you learn of the Company? \_\_\_\_\_

If referral, who were you referred by? \_\_\_\_\_

Have you ever applied or worked for ADP TotalSource or the Company 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**

**Note:** The Federal Immigration and Reform and Control Act of 1986 requires that a DHS Employment Eligibility Verification "Form I-9" be completed for every new hire and that within 3 business days of beginning work every new hire must present to the employer documentation establishing his/her identity and authorization to work. This federal requirement must be satisfied as a condition of employment.

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## DRIVING RECORD

(Answer only if driving is a requirement of the job for which you are applying).

Do you have a valid driver's license?  **Yes**  **No** State: \_\_\_\_\_ License No: \_\_\_\_\_

Have you had any tickets?  **Yes**  **No**

If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## 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	Grade Point/ Overall GPA
	Yes	No					
High School							
College or University							
Technical/GED							
Licenses/ Certification/Other							

## 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 active military assignments and voluntary employment and provide ten (10) years of history. (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: \_\_\_\_\_ Rate of Pay: Start: \_\_\_\_\_ Last: \_\_\_\_\_

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: \_\_\_\_\_ Rate of Pay: Start: \_\_\_\_\_ Last: \_\_\_\_\_

State job titles and describe job duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

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Address: \_\_\_\_\_

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Company Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_ May we contact:  Yes  No

Dates Employed: From: \_\_\_\_\_ To: \_\_\_\_\_ Rate of Pay: Start: \_\_\_\_\_ Last: \_\_\_\_\_

State job titles and describe job duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

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Please explain any gaps in your employment history: \_\_\_\_\_

\_\_\_\_\_

Have you ever been discharged or forced to resign?  Yes  No

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

\_\_\_\_\_

Did you receive any discipline in your last 12 months of active employment with your previous employer?

Yes  No If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Were you given a performance evaluation within the last 12 months of active employment?  Yes  No

If yes, what was the range of scores used and what was your score? \_\_\_\_\_

\_\_\_\_\_

Have you signed any non-competition or non-solicitation agreement with any other employer that might restrict you from working for the Company (you may be required to furnish a copy of the agreement)?

Yes  No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

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**REFERENCES** (Please list three persons not related to you who know your qualifications.)

NAME	ADDRESS	PHONE	RELATIONSHIP

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

Branch of Service: \_\_\_\_\_ Number of Years /Months of Service: \_\_\_\_\_

Rank at Discharge; \_\_\_\_\_ Date of Discharge: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**LIE DETECTOR TESTS**

**Massachusetts Applicants Note:** It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

**Maryland Applicants Note:** An employer may not require or demand, as a condition or prospective employment or continued employment, an individual submit to or take a lie detector or similar test. An employer who violates this law is guilty of a misdemeanor and subject to a fine not exceeding \$100. I have read and acknowledge this notice:

Applicant's Signature: \_\_\_\_\_

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**All Applicants:** You must answer all questions below unless specifically otherwise noted below. Please review the information prior to answering.

When answering the following questions, you may exclude any records expunged, annulled, sealed, discharged, dismissed, erased under first-offender law or otherwise eradicated by statute or court order.

**California Applicants:** When answering, you need not identify any conviction for marijuana related offense if the conviction is more than two years old, or any information pertaining to referral to and participation in any pre-trial or post-trial diversion program.

**Connecticut Applicants:** (see following page)

**Hawaii Applicants:** Do not respond to this inquiry until you have been given a conditional offer of employment. If you are required to respond, please limit your responses to crimes for which you were convicted within the past 10 years, excluding periods of incarceration

**Illinois Applicants:** You are not required to reveal any expunged convictions, including expunged juvenile convictions.

**Massachusetts Applicants:** Do not respond to these questions unless this box is checked:

If you are required to respond to these questions because this box is checked, please note that when answering these questions, an applicant for employment with a sealed record on file with the commissioner of probation may answer "no record" with respect to an inquiry herein relative to prior arrests, criminal court appearances, or convictions. In addition, any applicant for employment may answer "no record" with respect to any inquiry relative to prior arrests, court appearances, and adjudications in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court for criminal prosecution.

When answering, you may exclude a first conviction for any of the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace. You may also exclude any convictions of misdemeanors which are more than five years old if you have not been convicted of a misdemeanor in the past five years.

The reference to DUI/DWI includes OUI. You are only required to list convictions within the past 5 years.

**New York Applicants:** You are not required to reveal any Youthful Offender convictions.

**Philadelphia, PA Applicants:** Do not respond to these questions until after the employment application has been accepted and a first telephone or in-person employment interview has been conducted.

**Utah Applicants:** You may answer "No" with respect to any conviction for a misdemeanor or summary offense.

**Washington Applicants:** Answer "Yes" only if the conviction or release from imprisonment was within the last ten (10) years, or related to the functions of the position for which you are applying.

**Connecticut Applicants:** When answering the questions, you need not disclose the existence of any arrest, criminal charge or conviction records which have been erased pursuant to Conn. Gen. Stat. §§46b-146, 54-760, 54-142a. Also note that the aforementioned criminal records subject to erasure are records pertaining to a finding of delinquency or that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nulled, a criminal charge for which the person has been found not guilty or a conviction for which the person received an absolute pardon; and any person whose criminal records have been erased pursuant to the aforementioned sections is deemed to have never been arrested within the meaning of the general statutes with respect to the proceedings so erased and may so swear under oath.

Answer questions one (1) and two (2) on the next page only if driving is a requirement of the job for which you are applying.

**- space intentionally left blank-**



1. Has your license ever been suspended or revoked?  Yes  No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Do you have any DUI or DWI convictions?  Yes  No

If yes, please state when you were convicted and explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Have you ever been convicted of a felony within the last seven years?  Yes  No

If you checked "Yes," please explain below. A criminal conviction will not necessarily be a bar to employment. To help us evaluate your application, please describe the nature of the crime and your subsequent rehabilitation (attach additional sheets if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## APPLICANT'S ACKNOWLEDGMENT

I certify that the answers given herein (including but not limited to the Criminal and Additional Driver Record Information Supplement and Commercial Motor Vehicle Driver Supplement if applicable) are true and complete to the best of my knowledge. I understand that any misrepresentations, omissions of facts or incomplete answers in any application document may disqualify me from further consideration for employment. I further understand that, if employed, any misrepresentations or omissions of facts in any application document may be cause for my dismissal at any time without prior notice. I consent to and authorize the Company and ADP TotalSource 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 the Company or ADP TotalSource (without further notice to me) 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 either party(ies) 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 THE COMPANY OR ADP TOTALSOURCE 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 THE COMPANY OR ADP TOTALSOURCE. I ALSO UNDERSTAND THAT THIS ASPECT OF MY EMPLOYMENT WITH THE COMPANY MAY ONLY BE ALTERED WITH A WRITTEN AUTHORIZATION SIGNED BY THE CHIEF EXECUTIVE OFFICER OF THE COMPANY, AND THAT MY AT-WILL STATUS WITH ADP TOTALSOURCE MAY NOT BE ALTERED.**

I understand that applicants for certain positions 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; submit to a background investigation or take a pre-employment drug test. If I am offered employment or start work before any required test is completed, my employment is contingent on a satisfactory result on all required tests. I authorize the Company and ADP TotalSource to release the results of background checks (if any) and my pre-employment drug/alcohol test (if any), any information on this application and any relevant information about me to each other and to other ADP TotalSource clients for whom I have applied for employment, and release the Company, ADP TotalSource 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.

**CALIFORNIA APPLICANTS ONLY:** I understand the Company or ADP TotalSource may obtain, without using the services of a third party investigative consumer reporting agency, public records pertaining to my character, general reputation, personal characteristics or mode of living during its evaluation of my application for employment and, if employed, during my employment. By checking the following box, I waive my right to receive copies of public records obtained by the Company or ADP TotalSource.

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