
APPLICANT INSTRUCTIONS

Thank you for your interest in employment with our Company. We appreciate your application, and look forward to the possibility of you joining our team. This sheet is for your information. Please read it carefully.

If you need any assistance or accommodation to facilitate the filling out of this form or during any of the application process, please notify the person who gave you this form and every effort will be made to provide you with the help you request.

Please print all information so it can be easily read. Be certain that all questions are **completely** answered. Incomplete information forms will not be considered. Use the abbreviation "N/A" if a particular provision or section in the form is not applicable to you. If you need additional space, you may use the back of the form.

This application form is intended for use in evaluating your qualifications for employment. This is not a contract for employment. False or misleading information given in this form or during the interviewing process are grounds for terminating the application process or, if discovered after employment, for terminating employment. A background check and/or consumer report may be requested by the Company.

Employment decisions are made solely on the basis of qualifications to perform the work for which you are applying. Qualifications include education, training, and work experience. Credentials and experience will be verified through schools, former employers, and any other applicable sources. As an Equal Opportunity Employer, we make decisions to hire and promote without regard to race, color, national origin, religion, sex, age, disability or other legally protected status.

You should understand that the position for which you are applying is considered at-will, which means that either you or the company can terminate employment for any reason or no reason at any time. No one except the company president has the authority to amend this agreement.

We appreciate your interest.

I have read and understood the above information.

Signature _____ Date _____

APPLICATION FOR EMPLOYMENT

(Please Print)

Position Desired _____ Date _____

How did you learn about us?

Advertisement Friend Walk-In Relative Other _____

Name (Last) _____ (First) _____ (Middle) _____

Address _____ City _____ State _____ Zip _____

Telephone Number(s) _____ Social Security Number _____

Email Address _____ DOB: _____

Are you over 18 years of age?

Yes No

If you are under 18 years of age, can you provide proof of your
eligibility to work?

Yes No

Have you ever filed an application with us before?

Yes No

Are you able to perform the duties of the job for which you are applying?

Yes No

If "no", please describe: _____

Are you currently employed?

Yes No

May we contact your present employer?

Yes No

Are you legally authorized to work in the United States?

Proof of identity and work authorization will be required upon employment.

Yes No

On what date would you be available for work? _____

Availability: Full Time Part Time Shift Work Temporary

Can you travel if a job requires it?

Yes No

Have you ever been convicted or pled guilty or no contest to a felony and/or misdemeanor offense?

Yes No*

If yes, please explain.

For purposes of employment with **Katch Kan USA, LLC** "convictions" include sentenced to confinement, paid fine, time served, placed on probation (including deferred adjudication) and court-ordered restitution.

City/State _____ Charge _____

Please explain _____

**Conviction of a felony and/or misdemeanor will not necessarily bar you from employment.*

FELONY and/or MISDEMEANOR CONVICTION

I _____ agree to immediately notify **Katch Kan USA, LLC** if I am convicted of, receive deferred adjudication in, or otherwise plead guilty or no contest to a felony and/or misdemeanor, or any crime involving dishonesty or a breach of trust, while my application is pending or during my period of employment, if hired.

Signature of Applicant

Date

EDUCATION

Circle the highest grade completed in school:

1 2 3 4 5 6 7 8 9 10 11 12
 13 14 15 16

Name, address, city and state of last school
attended: _____

Vocational or Business schools
attended: _____

List names of friends or relatives now employed by **Katch Kan USA, LLC.:**

Person to contact in case of an emergency:

This information is to facilitate contact in the event of an emergency and is not used in the selection process.

Full Name

Phone

Address

Their place of employment

Phone

Relationship to you

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

EMPLOYMENT HISTORY

Start with your present or last job. You may also include any activities which you believe demonstrate your qualifications for the position applied.

CURRENT OR MOST RECENT EMPLOYER:

Name _____ Phone _____

Address _____

Positions/Duties: _____

Supervisor: _____

Reason for leaving _____

DATES EMPLOYED	
From	To
HOURLY RATE/SALARY	
Beginning	Ending

NEXT PREVIOUS EMPLOYER:

Name _____ Phone _____

Address _____

Positions/Duties: _____

Supervisor: _____

Reason for leaving _____

DATES EMPLOYED	
From	To
HOURLY RATE/SALARY	
Beginning	Ending

NEXT PREVIOUS EMPLOYER:

Name _____ Phone _____

Address _____

Positions/Duties: _____

Supervisor: _____

Reason for leaving _____

DATES EMPLOYED	
From	To
HOURLY RATE/SALARY	
Beginning	Ending

Use this space to give us other information about your personal skills or qualities, work style, interpersonal ability or communication skills which would further qualify you for this job.

Complete the following information only if applying for a position that requires use of a vehicle while conducting company business. If hired, your information may be verified with a Motor Vehicle Report.

How many traffic violations have you had during the last two years? _____

Drivers License Number: _____ State _____

REFERENCES

Name only those persons who are familiar with your work capabilities. Do not list relatives.

Name _____ Phone _____

Address _____

Position _____ Years Known: _____

Name _____ Phone _____

Address _____

Position _____ Years Known: _____

Name _____ Phone _____

Address _____

Position _____ Years Known: _____

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 180 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are accepted at that time.

I understand that I may be required to successfully complete a pre-employment physical examination conducted by a company-authorized physician and that I may be required to successfully complete a pre-employment drug/alcohol screening after a job offer of employment has been made.

Signature of Applicant _____ Date _____