## **APPLICATION FOR EMPLOYMENT**

## **EQUITY MANAGEMENT II, LLC**

## **An Equal Opportunity Employer**

Equity Management II, LLC is an Equal Opportunity Employer and does not discriminate based on race, color, creed, religion, sex, age, marital status, national origin, sexual orientation, genetic information, or status as a veteran or qualified disabled person, or on any other basis prohibited by applicable laws.

1.	Name:					
	Name:Last	First		Middle		
2.	Address:Number & Street	City	State	Zip Code		
3.	Social Security Number:	·		·		
4.	Telephone Number with Area Code:					
	Day () Evening (	)				
5.	Are you legally authorized to work in the United States without limited or restriction?					
	Equity Management II, LLC complies fully we Control Act of 1986 with respect to the employ the United States. If you accept employment required to de monstrate employment eligible acceptable documents from those listed on the Equity Management II, LLC does not discriminational origin or citizenship.	yment eligibility of al nt with Equity Mana bility by completin ne back of that form	l employees to y gement II, LLO g Form I-9 a within three (3)	work legally in C, you will be nd presenting ) days of hire.		
6.	Position applied for:	Full time:	Part time	:		
7.	Salary Expected: \$ Date Avail	able:				
8.	Have you worked for Equity Management II, I	LLC before?				
	Yes No					
	If yes, list dates, location, and position:					

9.	Have you ap	oplied for employment with E	quity Management II	, LLC before?	
	Yes	(Dates and position:		)	No
10.	Education:	(Only Job-related Education	Will be Considered.)		
	Туре	Name and Location of School	Circle Last Year Completed	Did You Graduate?	Major Course Degree Received
Eleme	entary		1 2 3 4 5 6 7 8		
High	School		1 2 3 4		
Colleg	ge		1 2 3 4		
Trade	/Business		1 2 3 4		
Other			1 2 3 4		
11.	Subjects of	study or research work:			
12.		ecial experiences, qualification ied for:			
13.		ecial licenses or certifications (List licensing authority, lice			

14.	If required for	the job you are seeki	ng, do you typ	e? Yes_	No	<u> </u>
	Approximate S	Speed: Typing	wpm			
15.		nent: (Give the fol the most recent.)	lowing inform	nation for all	present and prev	vious employers,
Addre	loyer Name, ess and Phone Number	Dates of Employment	Job Title	Pay Rate	Were you ever Disciplined? (Warnings, Suspension, Discharge)	Reason for Leaving?
					Yes No	
					Yes No	
					Yes No	
16.	If you ha ve circumstances:	had disciplinary pr	roblems with	any previou	s employer, plea	ase describe the
17.	Professional R worked or stud		elow the name	es of three (	3) persons with	whom you ha ve
	Name		Address		Position	Phone Number

18.	Personal References: Give below the names of two (2) persons, not related to you, whom you	ou
	have known at least two (2) years.	

Name	Address	Phone Number	Relationship to You	Years Acquainted

	Have you ever been convicted of or pled guilty to a crime or received a verdict of anything of than not guilty in any criminal investigation or proceeding?				
	Yes No				
	If yes, describe when the conviction occurred, the facts and circumstances, and any pertaining to rehabilitation. (Do not list any criminal charges for which the records have sealed or expunged. A criminal offense will not necessarily bar employment.)				
20.	Do you ha ve a contractual agreement, such as a non-competition agreement, that potentially limit your employment with us?  Yes No If you answered yes, please describe your circumstances.				
Date	Signature of Applicant				

## INFORMATION FOR APPLICANT - READ CAREFULLY BEFORE SIGNING

- 1. This application is valid for only thirty (30) days. If you have not been employed within thirty (30) days of your application, you must re-apply for a position
  - 2. By my signature below, I agree to the following:
- a. I consent to take any physical examinations, including but not limited to tests for alcohol or drugs that may be requested by E quity Management II LLC: (1) following an offer of employment and prior to commencement of work; and (2) during the course of my employment, consistent with applicable law, including but not limited to the Americans With Disabilities Act. I further authorize any health care professional or testing facility who performs such an examination or who has other information concerning my physical, mental or other medical status to release such information to Equity Management II, LLC. I understand that if my drug screen is positive for any illegal substance, that any offer of employment will be rescinded, or if I have already commenced work, I will be terminated.
- b. I understand that Equity Management II, LLC may request a Consumer Reporting Agency to inve stigate and verify my background by a sking for a consumer report in compliance with federal and state laws. If applicable to me, I consent to such report.
- c. I understand that any false statements or omissions made by me in connection with my application, or in responding to requests for information, can be sufficient grounds for my rejection as a candidate for employment or for my immediate discharge.
- d. I understand that any employment I might be offered by Equity Management II, LLC is at-will, of indefinite duration and not a contract, and that either I or Equity Management II, LLC can terminate that employment at any time with or without notice or cause, for any or no reason, and that no agreement to the contrary will be recognized by Equity Management II, LLC unless made in writing and signed by the President of Equity Management II, LLC. I also understand that nothing in this Application or any of the Company's practices, policies, or procedures in any way creates an express or implied contract of employment or warranty of any benefits. I further understand that satisfactory completion of my probationary period will not change my status as an at-will employee, and that Equity Management II, LLC reserves the right, at its sole discretion, to change any of the terms or conditions of my employment, written or unwritten, without prior notice and that none of such terms or conditions of my employment are contractual in nature or binding on Equity Management II, LLC.
- e. I understand that none of Equity Management II, LLC's practices or policies are to be construed as imposing any binding obligations on the Equity Management II, LLC, and that they are subject to change or deletion at any time in Equity Management II, LLC's sole discretion.
- f. I acknowledge and agree that if at any time I am subjected to any type of discrimination or harassment, I will contact Equity Management II, LLC's Human Resources Manager, or the President immediately to obtain assistance in the resolution of those matters.

I have read this Employment Application and its attachments and I fully understand its contents. By my signature below, I hereby certify that I have answered all questions fully, have provided truthful and accurate answers to all questions, and have not omitted any information called for in the Application. I further agree that I am seeking employment with Equity Management II, LLC under the terms and conditions described in this Employment Application and its attachments.

Date

Signature of Applicant