



Setting the New STANDARD

Application for Employment

Personal Information

Last	First	MI	Email
Street address	City	ST	Zip
Home phone		Mobile phone	
Are you 18 years of age or older? Yes <input type="checkbox"/> No <input type="checkbox"/>		Date of Birth:	
Can you, upon employment, provide proof of your legal right to work in the United States? (PROOF OF ELIGIBLE WORK STATUS WILL BE REQUIRED UPON HIRE)			Yes <input type="checkbox"/> No <input type="checkbox"/>
Will you now, or in the future, require sponsorship for employment visa status?			Yes <input type="checkbox"/> No <input type="checkbox"/>
Driver's License Number and State issued:		Social Security Number:	
Position(s) applied for:	Requested salary range:	Date available for work:	
Have you previously been employed by KW International, LLC? If yes, please list dates and former Supervisor.		Referral source: <input type="checkbox"/> Advertisement <input type="checkbox"/> Website <input type="checkbox"/> Friend <input type="checkbox"/> Walk-in <input type="checkbox"/> Other	
Please provide details (i.e., if advertisement, please list ad source/website; if referred by a friend, please list referral name):			
Do you have relatives working for KW International, LLC in any of our locations? If yes, please indicate who and which department/location.			Yes <input type="checkbox"/> No <input type="checkbox"/>

Education (all education listings are subject to verification)

High school:	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	
College:	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree:
Trade/business:	Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Degree:
Other special training or skills:		

Previous Employment (please list present employment/most recent first. All employment history listings are subject to verification)

(1) Employer name:	Dates employed:	Ending pay:
Position(s) held:	General duties:	
Reason for leaving:	Supervisor's name:	Supervisor's phone number:
(2) Employer name:	Dates employed:	Ending pay:
Position(s) held:	General duties:	
Reason for leaving:	Supervisor's name:	Supervisor's phone number:
(3) Employer name:	Dates employed:	Ending pay:
Position(s) held:	General duties:	
Reason for leaving:	Supervisor's name:	Supervisor's phone number:

References

(1) Reference name:	Phone number:	Business/company:	Relationship:
(2) Reference name:	Phone number:	Business/company:	Relationship:
(3) Reference name:	Phone number:	Business/company:	Relationship:

Applicant's Statement (please read carefully and sign below)

I fully understand and acknowledge that all answers and information provided in this application for employment are accurate and complete. I further understand that if I provide false or misleading information, willfully omit information on this application or my resume, during an interview or while employed, I may be denied employment or subject to disciplinary action, including termination of employment.

This application for employment may be considered for a period not to exceed six (6) months. I understand that after that period, if I still desire employment consideration, I must reapply.

I authorize KW International, LLC to fully conduct a background investigation and to verify all statements and information contained in this application for employment. I authorize any reference, business or educational institution named in this application to provide any information requested and to provide reference information sought.

I understand that, if hired, my employment relationship will be "at will" indicating that I, or KW International, LLC, may at any time, for any reason or without reason, cause or notice, terminate the employment relationship. I also acknowledge that nothing in this application, any interview or offer of employment creates any form of a contract of employment.

All applicants will be considered for available vacancies without regard to race, color, sex, age, national origin, citizenship or veteran status, disability, or any other factor protected by federal, state or local law.

Signature of applicant

Printed name of applicant

Date