

## APPLICATION FOR EMPLOYMENT

We appreciate your interest in OSTIA. OSTIA is an equal employment opportunity employer. OSTIA's policy is not to discriminate against any applicant or employee based on race, color, sex, sexual orientation, religion, national origin, age (40 and over), past or present military service, disability, genetic information, or any other basis protected by applicable federal, state, or local laws. OSTIA also prohibits harassment of applicants or employees based on any of these protected categories.

### GENERAL INFORMATION

Please complete all requested information. Use ink and print.

Location: _____ Today's Date: _____	Position Applying For: _____	
Name (Last) _____ (First) _____ (Middle) _____	Minimum Salary Desired _____	Date Available for Work _____
Street Address _____	Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No	
City _____ State _____ Zip _____	Telephone (Personal) _____ Telephone (Work) _____ (____) ____-____ (____) ____-____	
Have you previously worked for or applied for a position with OSTIA, in any of our locations either as an employee or through an employment agency?  <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain when and, if employed, in what capacity: _____	Are you related to or in a close personal relationship with anyone now employed at OSTIA? (An answer of "Yes" will not automatically disqualify you from the position for which you are applying.)  <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, state name(s) and where they are located. _____	
Are you available to work overtime as needed?  <input type="checkbox"/> Yes <input type="checkbox"/> No  If yes, are you available weekdays? _____ weekends? _____		

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 status)?  Yes  No

### REFERRAL INFORMATION

How did you learn about OSTIA?

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|--|--|
| <input type="checkbox"/> Employment Agency (state name): _____ | <input type="checkbox"/> School (state name): _____          |
| <input type="checkbox"/> Reputation of Firm _____              | <input type="checkbox"/> Newspaper ad (name of paper): _____ |
| <input type="checkbox"/> Referral (state name): _____          | <input type="checkbox"/> Other: _____                        |

Please specify your complete full-time and part-time employment history, including self-employment. Begin with your most recent employer. If you require additional space, please use the reverse side of this page and/or the following page.

1	Company Name _____	Telephone (____) _____ - _____
	Address _____	Employed (Month and Year) From _____ To _____
	Name, Title, and Phone Number of Supervisor _____	Monthly Wages Start _____ Last _____
	Job Title, and Work Responsibilities _____ _____	Reason for Leaving: _____ _____
2	Company Name _____	Telephone (____) _____ - _____
	Address _____	Employed (Month and Year) From _____ To _____
	Name, Title, and Phone Number of Supervisor _____	Monthly Wages Start _____ Last _____
	Job Title, and Work Responsibilities _____ _____	Reason for Leaving: _____ _____
3	Company Name _____	Telephone (____) _____ - _____
	Address _____	Employed (Month and Year) From _____ To _____
	Name, Title, and Phone Number of Supervisor _____	Monthly Wages Start _____ Last _____
	Job Title, and Work Responsibilities _____ _____	Reason for Leaving: _____ _____

(Employment record continued on next page.)

Please specify your complete full-time and part-time employment history, including self-employment. Begin with your most recent employer. If you require additional space, please use the reverse side of this page and/or the following page.

<b>4</b>	Company Name _____	Telephone (____) _____ - _____
	Address _____	Employed (Month and Year) From _____ To _____
	Name, Title, and Phone Number of Supervisor _____	Monthly Wages Start _____ Last _____
	Job Title, and Work Responsibilities _____ _____	Reason for Leaving: _____ _____

**All employers including your current employer may be contacted to verify the information you provide.** May we contact your current employer prior to any offer of employment? Yes  No

Individuals not related to you. Business references preferred.

Name	Occupation	Phone	Address	Years Known and Capacity
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Please include name, street, city, state and zip code for each school.

School	Name and Location of School	Number of Years Completed	Degree	Type of Course/Major
Graduate	_____ -	_____	_____	_____
College	_____ -	_____	_____	_____
High School	_____ -	_____	_____	N/A
Business/Trade/Technical	_____ -	_____	_____	_____

Please summarize your job-related skills and qualifications:

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**THIS APPLICATION IS NOT COMPLETE UNTIL IT IS FULLY COMPLETED, SIGNED, AND ALL STATEMENTS BELOW HAVE BEEN READ AND INITIALED**

Initial: I certify that all of the information furnished on this application and during the application process is true, complete and correct to the best of my knowledge. I understand that any misrepresentation or omission of facts called for may result in refusal to hire or, if hired, may result in my dismissal at any time regardless of when the false answer or omissions are discovered.

Initial: I recognize that this employment application is not an offer of employment. I agree that if I **am hired by the Company, I will be an at-will employee**, meaning that either the Company or I may end the employment relationship at any time with or without cause or notice. I understand that only the Owners of OSTIA, and no manager, supervisor, or other representative of the Company, has authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the at-will employment relationship, and with respect to any agreement entered into by the Owners, any such agreements must be in writing and signed by the Owners and by me or my authorized representative.

Initial: I further understand and agree that, except for my at-will employment status, if hired, my wages, hours, working conditions, job assignment(s), and compensation rate(s) will be subject to change by OSTIA.

Initial: I understand that OSTIA may share the information contained in this application with other OSTIA employees for employment and administrative purposes and hereby consent to such transfer.

Initial: I hereby authorize, to the extent allowed by applicable federal state and local laws, OSTIA to conduct its own investigation of my references, employment history and education and, further, authorize the references and prior employers I have listed to disclose to the OSTIA information related to my employment history and qualifications for the position for which I am applying, without giving me prior notice of such disclosure.

Initial: I understand and expressly agree that if employed by the OSTIA, storage areas provided for me (locker, desk, etc.) are open to investigation by the OSTIA without prior notice to me.

**My signature below certifies that I agree to be bound by the terms and conditions stated in this application, which contains all the understandings between the Company and me concerning the topics addressed herein, and supersedes any prior inconsistent understandings between the Company and me on such issues.**

APPLICANT'S SIGNATURE

DATE

This application will only be considered for 30 days. If you have not been hired within 30 days of submitting this application and you wish to continue to be considered for employment, you must complete another application.