TIER Inc Employment Application

Personal Info	rmation				ast Name, First Initial:
Name (Last, Firs	t, MI)				ne, Fii
Street address					rst Inii
City, State, Zip					tial:
Home phone num	nber	Work phone no	umber		
Facsimile numbe	 ET	E-mail address	3		
Social security n	umber	Driver's licens	se number/state/e	xpiration	
		(if job	involves any driv	ring)	
Employment	Desired				
Position applied	for				
How did you hea	ar about this position?				
Date available fo	r work	Desired hours	(full time, part ti	me, etc.)	
Education					
	Name and Address of School	Course of Study	Total Years of Study	Degree/ Diploma	
High School					Toda
Undergraduate					
College					's D
Graduate/					Date:
Professional					
Other (Specify)					
	s, classes or other educatio	n not listed above	e which may heli	p qualify	
	tion (if you need additional			: 1 7	
					<u> </u>

Employment History

Employer (current Yes [□ No) Start Date	End Date	Essential job functions final position
Address			1.
City, State, Zip	Starting Salary	Ending Salary	2.
Phone number			3.
Fax number	Supervisor(s)		4.
Job position(s)	E-mail address of su	pervisor	
.,	to this company or its custom	ers?	
What value did you add	Start	End	
What value did you add			final position
What value did you add Employer Address	Start	End	Essential job function final position 1.
Reason(s) for leaving What value did you add Employer Address City, State, Zip Phone number	Start Date Starting	End Date Ending	final position 1.
What value did you add Employer Address City, State, Zip	Start Date Starting	End Date Ending	final position 1. 2.
What value did you add Employer Address City, State, Zip Phone number	Start Date Starting Starting Salary	End Date Ending Salary	final position 1. 2. 3.

[PLEASE CONTINUE ON NEXT PAGE]

Employment Application

Employment History

3.	Employer		Start Date	End Date	Essential job functions of final position
	Address				-
	City State 7in		Ctantina	Ending	1.
	City, State, Zip		Starting Salary	Salary	2.
	Phone number				
		_			3.
	Fax number	Supervisor	r(s)		4
	Job position(s)	E-mail add	dress of sup	ervisor	4.
	Reason(s) for leaving				
	What value did you add to this	company or	its custome	ers?	
	,				
4.	Employer		Start Date	End Date	Essential job functions of final position
4.	Employer Address		Start Date	End Date	Essential job functions of final position
4.	1 0				
4.	1 0		Date Starting	Date Ending	final position 1.
4.	Address City, State, Zip		Date	Date	final position
4.	Address		Date Starting	Date Ending	final position 1. 2. 3.
4.	Address City, State, Zip	Supervisor	Date Starting Salary	Date Ending	final position 1. 2. 3.
4.	Address City, State, Zip Phone number		Date Starting Salary	Date Ending Salary	final position 1. 2. 3.
4.	Address City, State, Zip Phone number Fax number		Starting Salary	Date Ending Salary	final position 1. 2. 3.
4.	Address City, State, Zip Phone number Fax number Job position(s) Reason(s) for leaving	E-mail add	Starting Salary r(s) dress of sup	Date Ending Salary ervisor	final position 1. 2. 3.
4.	Address City, State, Zip Phone number Fax number Job position(s)	E-mail add	Starting Salary r(s) dress of sup	Date Ending Salary ervisor	final position 1. 2. 3.
4.	Address City, State, Zip Phone number Fax number Job position(s) Reason(s) for leaving	E-mail add	Starting Salary r(s) dress of sup	Date Ending Salary ervisor	final position 1. 2. 3.

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Employment Application

Employment History

5.	Employer		Start	End	Essential job functions of
			Date	Date	final position
	Address				
	City State 7:-		Ctantina	Ending	1.
	City, State, Zip		Starting Salary	Salary	2
	Phone number		Salary	Salary	2.
	Thone number				3.
	Fax number	Supervisor		l	
					4.
	Job position(s)	E-mail add	dress of sup	ervisor	
	Reason(s) for leaving				
	What value did you add to this	company or	its custome	ers?	
	What value did you add to this t	company or	its custoffic	15.	
6.	Employer		Start	End	Essential job functions of
6.			Start Date	End Date	Essential job functions of final position
6.	Employer Address				final position
6.	Address		Date	Date	
6.			Date Starting	Date Ending	final position 1.
6.	Address City, State, Zip		Date	Date	final position
6.	Address		Date Starting	Date Ending	final position 1. 2.
6.	Address City, State, Zip Phone number	Supervise	Date Starting Salary	Date Ending	final position 1.
6.	Address City, State, Zip	Supervisor	Date Starting Salary	Date Ending	final position 1. 2. 3.
6.	Address City, State, Zip Phone number Fax number	-	Starting Salary	Ending Salary	final position 1. 2. 3.
6.	Address City, State, Zip Phone number	-	Date Starting Salary	Ending Salary	final position 1. 2. 3.
6.	Address City, State, Zip Phone number Fax number Job position(s)	-	Starting Salary	Ending Salary	final position 1. 2. 3.
6.	Address City, State, Zip Phone number Fax number	-	Starting Salary	Ending Salary	final position 1. 2. 3.
6.	Address City, State, Zip Phone number Fax number Job position(s) Reason(s) for leaving	E-mail add	Starting Salary	Ending Salary ervisor	final position 1. 2. 3.
6.	Address City, State, Zip Phone number Fax number Job position(s)	E-mail add	Starting Salary	Ending Salary ervisor	final position 1. 2. 3.
6.	Address City, State, Zip Phone number Fax number Job position(s) Reason(s) for leaving	E-mail add	Starting Salary	Ending Salary ervisor	final position 1. 2. 3.

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Employment A	ppli	cation		
Additional Information				
List any professional, trade, business or civic activities and offices held. You may exclude membership that would reveal gender, race, religion, national origin, ancestry, age, disability or any other protected status.				
List any languages othe the position applied for:		English that you ca	an speak, read or write	that could be of benefit to
the position applied for	•	Fluent	Good	Fair
Speak				
Read				
Write				
Identify formal job train that relates to this position				
Identify what skills or certification you possess related to this position:				
If you are hired, what value would you add to our company?:				
Describe what you belied are the most unique feat of your work history:				

Employment Application Additional Information Have you ever been employed with this company before? \square Yes \square No If Yes, when? Do you have any friends or relatives employed by this company? \square Yes \square No If Yes, please provide their names and relationship to you: Are you currently employed? \square Yes \square No May we contact your employer? ☐ Yes ☐ No Are you currently on "lay off" status and subject to recall? ☐ Yes ☐ No If you are under 18 years of age, can you provide proof of your eligibility to \square Yes \square No work? If hired, can you provide proof of U.S. citizenship or proof of your legal right \square Yes \square No to work in the U.S.? Are you able to perform all of the essential functions of the job for which you \Box Yes \Box No are applying with or without reasonable accommodation? If hired, are there any accommodations the company would need to provide so \Box Yes \Box No that you can perform all those essential functions and duties of the position being applied for? If Yes, please explain: _____ If driving is a requirement of the position applied for, have you in the last 7 \square Yes \square No years been convicted of Driving Under the Influence "(DUI)" \square N/A If hired, do you have a reliable means of transportation to and from work? \square Yes \square No If hired, would you be able to travel or work overtime as needed? \square Yes \square No

Have v	ou ever been convicted of a felony or misdemeanor?	□ Yes	□ No │
	please explain:		
	UCTIONS FOR ANSWERING APPLICATION QUESTION ABOUT BEING CONVI HER STATE-SPECIFIC REQUIREMENTS	CTED OF .	A CRIME
only as	ainal record does not constitute an automatic bar to employment and versit substantially relates to the job in question. If you are applying for a my in the following states, please read the following instructions before re	position	with our
CA	Do not provide information concerning:(1) any conviction for which the record has been judicially ordered sestatutorily eradicated. or:,(2) any misdemeanor conviction for which probation has been completed and the case has been judicially dismissed.	-	
MA	Have you ever been convicted of a felony? Yes Nowhen? Within the last five years have you been convicted of or released from a misdemeanor, which was not a first offense for drunkenness, simple as minor traffic violation, an affray or disturbing the peace? θ Yes θ No R (A criminal conviction will not necessarily be a bar to employment. To your application, please describe the nature of the crime and rehabilitation.) In Massachusetts, an application for employment with a sealed record commissioner of probation may answer "No Record" with respect to a relative to prior arrests, criminal court appearances or convictions. employment with a sealed record on file with the commissioner of probation. "No Record" to an inquiry herein relative to prior arrests or criminal of the addition, any applicant for employment may answer "No Record" winquiry relative to prior arrests, court appearances and adjudication delinquency or as a child in need of services which did not result transferred to the superior court for criminal prosecution.	d on file any inquir An application may court appears in all	evaluate beequent with the ry herein icant for y answer earances. ct to any cases of
NV	Only report those convictions that occurred within the past seven (7) year	ars.	
NH	Only report those convictions that have taken place in the past Convictions, which have not been annulled, will not necessarily dis employment.		
OR	Do not provide information concerning a juvenile record that has been e	xpunged.	
SD	Have you been convicted of a felony?		
WA	Limit your answer to convictions for which the date of conviction whichever is more recent, is within seven (7) years of today's date.	or prison	release,

Employment Applicatio

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List below three persons not related to you who have knowledge of your work performance within the last 5 years

Name		Occupation
Company name	Address	
Telephone	E-mail	Relationship & years acquainted
Name		Occupation
Company name	Address	
Telephone	E-mail	Relationship & years acquainted
Name		Occupation
Company name	Address	
Telephone	E-mail	Relationship & years acquainted
Additional Space		
Additional space provid application	ed to expand on any points or	questions asked previously in this

PLEASE USE ADDITIONAL PAPER IF NECESSARY

Employment Application

Please read each statement closely and initial each acknowledging your understanding

Equal Employment Opportunity Statement

This company is committed to the principles of equal employment opportunity and is committed to make employment decisions based on merit. We are committed to complying with all Federal, State and local laws providing for equal employment opportunities, as well as all laws related to terms and conditions of employment. The Company desires to maintain a work environment that is free of sexual harassment and discrimination due to race, religion, color, national origin, physical or mental disability, age or any other status protected by Federal, State or local laws. The Company will make reasonable efforts to accommodate those physical or mental limitations of an otherwise qualified employee unless undue hardship would result for the company.

Discrimination and Sexual Harassment Policy Statement

This Company will not tolerate any form of unlawful discrimination, including sexual harassment. Any employee who engages in unlawful discrimination or sexual harassment will be subject to appropriate discipline, up to and including termination. Prohibited sexual harassment is defined as follows: Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature constitutes sexual harassment when (1) submission to such conduct is made whether explicitly or implicitly a term or condition of an individual's employment; (2) Submission to or action of such conduct by an individual is used as the basis for employment decisions affecting such individuals; or (3) Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive work environment.

Disclosure to Applicants Concerning Drug/Alcohol Testing

If you are offered a position with the Company, you may be given a drug/alcohol test as a condition of employment. Your refusal to timely submit to a drug/alcohol test or your failure to pass such a test means you will not be employed by this company. Neither the collector of specimens nor the medical professional who reviews the test results will be a company employee. The test results will be kept confidential. The individual undergoing testing will not be directly observed while providing the specimen unless there are reasonable grounds to believe the individual may alter or substitute the specimen. Negative test results are required as a condition of employment.

Complete and Accurate Information

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I have personally completed this application. I understand that any omission or misstatement of material fact on this application, or any other document used to secure employment, shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

	At-Will Employment I understand and agree that if I am employed, my employment will be "at-will", which means that the Company may terminate the employment relationship at any time, with or without cause and with or without notice. Likewise, the Company will respect my right to terminate my employment at any time, with or without cause and with or without notice. I further understand that any prior representation, whether expressed or implied to the contrary is hereby superceded and that no promise or representation contrary to the foregoing is binding on the Company unless made in writing and signed by the Company's president.
	Testing Authorization If offered a position with the Company, I hereby agree to any legally permitted physical, psychological, skill, drug or medical test required by the Company as a condition of employment.
	Investigation Authorization I authorize investigation into all statements and references contained in this application. Said investigation may include credit, driving, criminal background, references and other background checks. By applying for this job, I also authorize post-hire investigation into my credit, driving and criminal background.
	Company Obligation I understand and agree that the Company's acceptance of this job application does not mean that a position for which I am qualified is open (unless specifically posted) or that the company has agreed to hire me. I understand that the Company is under no obligation to hire me as the result of accepting this completed application.
	I HAVE READ AND UNDERSTAND THE ABOVE POLICY STATEMENTS AND AGREE TO BE BOUND BY THEM IF EMPLOYED BY THE COMPANY.
	Signature Date
ADDIT	IONAL NOTES: