



EMPLOYMENT APPLICATION

Adams Consulting Group, LLC is an equal opportunity employer and does not discriminate against any individual on the basis of race, sex, religion, national origin, age, citizenship, marital status, sexual orientation, mental or physical disability, disabled veteran or Vietnam era veteran status, on the basis of knowledge or belief that the applicant has tested positive for AIDS, AIDS Related Complex or HIV, or any other basis protected by federal, state or local law.

PERSONAL INFORMATION

Name:

Address: First Middle Last City: State: Zip:

Phone: Are you 18 years or older? Yes_____ No_____

Are you able to supply documentation sufficient to complete the I-9 form required by the Federal Immigration and Control Act of 1986? Yes_____ No_____

Have you ever been convicted of a felony? Yes_____ No_____ If yes please explain:

(A record of conviction will not necessarily disqualify you from employment. Factors such as age and time of offense, seriousness and nature of the offense, rehabilitation and the specific duties and responsibilities of the position sought will be taken into account)

Position Desired: Referred By:

Are you employed now? Yes_____ No_____ Start Date:

Present Employer:

EDUCATION

	Name of School	Degree/Major
Graduate		
College		
High School		

Other		
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EMPLOYMENT INFORMATION

Employer Name and Address:

Position:	From:	Salary:
	To:	Base: Bonus:

Supervisor: (Name and Title):	Phone Number:
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Reason for Leaving:

Employer Name and Address:

Position:	From:	Salary:
	To:	Base: Bonus:

Supervisor: (Name and Title):	Phone Number:
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Reason for Leaving:

Employer Name and Address:

Position:	From:	Salary:
	To:	Base: Bonus:

Supervisor: (Name and Title):	Phone Number:
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Reason for Leaving:

PROFESSIONAL REFERENCES

Name:	Title:	Company:	Phone:	Dates:
1.				
2.				
3.				

I understand that this application is not intended to be a contract of employment and that I am not being considered for employment of any definite period. I understand and agree that, in the event the Company should employ me, my employment will be at-will, such that either the Company or I may terminate my employment at any time and for any reason or for no reason.

I certify that the statements made in this application (and any accompanying resume) are true and correct to the best of my knowledge. I understand that any misinformation, falsification or failure to disclose pertinent information will result in the termination of my employment, if hired. I authorize all present or prior employers, educational institutions, and the individuals listed by me on this application to release to any information relevant

to this application, including information about my employment record, and hereby release them from liability and responsibility for doing so.

I understand that any offer of employment is contingent upon my supplying documentation to substantiate my identity and employment eligibility sufficient to complete the I-9 Form required by the Federal Immigration and Control Reform Act of 1986.

Signature of Applicant

Date

DISCLOSURE STATEMENT

By this document, the Company discloses to you that a consumer report or an investigative consumer report may be obtained for employment purposes as part of a pre-employment background investigation and at any time during your employment.

Please sign below to signify receipt of the foregoing disclosure.

Signature: _____

Print Name: _____

Date: _____