

## NOTA EMPLOYMENT APPLICATION

PLEASE PRINT OR TYPE	Today's Date					
First Name	М/	Last Name		Preferred N	Name/Nickname	
Street Address	Apt #	City	State	Zip Code		
Home Phone	Alternate/	Work Phone Email Address				
PLEASE CHECK YES OR NO TO THE I	OLLOWING:					
Are you authorized to work in the U	the United States? Yes No					
Federal law requires that employers I States. In compliance with these law Company. In this connection, all offe employment authorization, and it will your identification and employment a	s, NOTA will vers of employments of employments of the control of	erify the status of e	every individual o verification of the	ffered emplo applicant's id	yment with the dentity and	
Have you ever been convicted of a felony?				Yes	No	
Have you Failed or Refused a DOT Pre-employment test in the previous			ous two Years?	Yes	No	
Are you under 18 years of age?			Yes	No		
If yes, can you furnish a work permit?			Yes	No		
Are you capable of performing the essential functions of the job for Yes No which you are applying with or without a reasonable accommodation?						

**NOTA** is an equal opportunity employer and does not discriminate against any applicant or employee because of race, color, religion, sex, national origin, disability, age, or military or veteran status in accordance with federal law. In addition, NOTA complies with applicable state and local laws governing non-discrimination in employment in every jurisdiction in which it maintains facilities. NOTA also provides reasonable accommodation to qualified individuals with disabilities in accordance with applicable laws.

## PLEASE LIST YOUR WORK EXPERIENCE BELOW (MOST RECENT JOB FIRST)

	COMPANY NAME		YOUR POSITION and TITLE				
FROM	NO. & STREET	NO. & STREET		SUPERVISOR'S NAME, TITLE and POSITION			
/							
Month Year	CITY	STATE	ZIP CODE	SUPERVI	SOR'S TELE	PHONE NUMBER	
	TYPE OF BUSINESS		STARTING PAY	<u> </u>	FINAL PAY	<del>,     </del>	
		\$		\$			
ŤO	TELEPHONE NUMBER TERM		TERMINATION	REASON			
Month / Year			VOLUNTAR				
	BRIEFLY DESCRIBE	YOUR MAJOR DUTI	 <u>ES</u> AND <u>REASON(S) F</u>	OR TERMI	NATION		
	COMPANY NAME			YOUR PC	SITION and	TITLE	
				AURED MODEL NAME TITLE I DOOLTON			
FROM	NO. & STREET			SUPERVISOR'S NAME, TITLE and POSITION			
Month Year							
	CITY	STATE ZIP CODE		SUPERVISOR'S TELEPHONE NUMBER			
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	TYPE OF BUSINESS		STARTING PAY	<u> </u>	FINAL PAY	,	
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то	TELEPHONE NUMBE			TERMINATION		REASON	
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Month Year	( )		VOLUNTAR	ARY			
	BRIEFLY DESCRIBE YOUR MAJOR DUTIES AND REASON(S) FOR TERMINATION						
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<i>RIVERS LICENSE</i> DUCATION:	NUMBER:		7	YPE OF	LICENS	E:	
NAME AND ADDRESS OF SCHOOL			MAJOR SUBJECT		YOU UATE?	TYPE OF DEGREE OR DIPLOMA	
HIGH SCHOOL OR PREF							
COLLEGE		1				-	

COLLEGE OR GRADUATE			
OTHER			
EFERENCES: Please	list three professional ref	erences NOT PERSO	NAI REFERENCES
NAME	RELATIONSHIP	COMPANY	PHONE/ALTERNATE PHONE

## PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION

I have submitted the attached form to the company for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the company to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from the Company's employ.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with the Company in the position I am seeking.

I understand that this application is not an employment contract for any specific length of time between the Company and me, and that in the event I am hired, my employment will be "at will" and either the Company or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy and the like, distributed by the Company to its employees is intended to or can create an employment contract, an offer of employment or any obligation on the Company's part. The Company may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any benefit, policy practice, condition or process affecting its employees.

References: I hereby authorize the company and its agents to make such investigations and inquires into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquires connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications.

SIGNED:	DATE:	