



EMPLOYMENT APPLICATION

PLEASE PRINT

PERSONAL DATA

Last Name	First Name	Middle Initial	Social Security Number	Telephone Number (Area Code & Number) Home Telephone: Business Telephone:	
Address - Street		City	State and Zip Code		
1. Do You Have the Legal Right to Live & Work In the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		2. Are You at least 21 Years of Age? <input type="checkbox"/> Yes <input type="checkbox"/> No		3. Have You Ever Been Convicted of a Crime? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If You Answered Yes to Question Number 3 Please Explain: _____					
Have You ever Applied for Employment with Us? Yes <input type="checkbox"/> No <input type="checkbox"/> If "Yes" Month and Year _____ Location _____					

JOB INTEREST

Date Available for Employment	Position Applied For (Be Specific)
<input type="checkbox"/> Full Time <input type="checkbox"/> Regular <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary	What is the Minimum Salary Acceptable?

EDUCATION

Name of School and Location	Diploma/	No. of Credits	Major	Minor
High School			N/A	N/A
College or University				
Graduate School				
Technical, Trade, Professional or Military Schools				
Business Schools				
Licenses/	Agency/Date	Agency/Date		

List By Descriptive Title (Not Course Number) any Courses that You Have Taken and Any Equipment that You Can Operate That are Applicable to the Job Areas In Which You are Interested.

Subject or Equipment	Credit	Grade	Subject or Equipment	Credit	Grade	Subject or Equipment	Credit	Grade

ORGANIZATIONS

Membership in Professional or Civic Organizations (Exclude those which may Disclose Your Race, Religion or Natural Origin)

MILITARY

Complete Below If You Served in United States Armed Forces
Branch of Service
Describe Your Duties and Special Training



EMPLOYMENT HISTORY

List Previous Employers - Most Recent First (Volunteer/Unpaid Services Are Acceptable)		
Employer's Name	Dates Employed From _____ To _____	Final Salary
Address	Supervisor's Name	Phone Number
City _____ State/Zip Codes _____	Reason For Leaving	
Job Titles and Duties (Include Specific Skills to Perform Duties Outlined)		

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Job Titles and Duties (Include Specific Skills to Perform Duties Outlined)		

How Were You Referred to Our Organization					
<input type="checkbox"/> College/University	<input type="checkbox"/> Recruiter/Agency	<input type="checkbox"/> Employee	<input type="checkbox"/> Advertisement	<input type="checkbox"/> Walk-In	<input type="checkbox"/> Other

To Aid in Our Verification Efforts, Please List Any Other Name(s) Used While Employed _____
2



Email Address: _____

REFERENCES

Name and Occupation	Address	Telephone Number
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

DO NOT WRITE BELOW THIS LINE

JOB REFERRAL INFORMATION

Date	Position	Department	Supervisor
1. _____	_____	_____	_____
Results/Interviewer _____			
2. _____	_____	_____	_____
Results/Interviewer _____			
3. _____	_____	_____	_____
Results/Interviewer _____			
4. _____	_____	_____	_____
Results/Interviewer _____			
5. _____	_____	_____	_____
Results/Interviewer _____			

Comments: _____



EMPLOYMENT APPLICATION Releases and Applicant's Signature

BCSi is an equal opportunity affirmative action employer, dedicated to a policy of non-discrimination in employment on any basis including age, sex, color, race, creed, national origin, religion, marital status, sexual orientation, political belief or disability.

Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity within three (3) days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination.

Releases and Applicant's Signature

In connection with my application for employment and as a condition of continuing employment, I understand that investigative background inquiries may be made on me including previous employers, schools, consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, work habits, performance, education, compensation, and experience along with reasons for termination of employment from previous employers. Furthermore, I understand that the company may be requesting information from various federal, state, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies. I authorize without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. I hereby consent to obtaining the above information from BCSi and/or any of their agents. This authorization and consent shall be valid in original, fax, or copy form.

Initials

All hiring and employment at BCSi is at will. I understand this application is not an employment contract, nor can it be used to create one. Employment by BCSi has no specific term and may be terminated by the employee or BCSi with or without notice. I acknowledge that BCSi has not made any promises or representations that differ from those contained in this paragraph.

I understand I must provide satisfactory documents to establish my identity and right to work in the United States, if I am offered a position with BCSi, and that failure to provide this evidence will result in the termination of my employment.

I release and agree to hold harmless any individual, company, business institution or government agency from all liability with regard to furnishing information to BCSi I agree to release and hold harmless BCSi from all liability with respect to the receipt of such information.

I certify that the information I have furnished on this application form is true and complete. I understand that if any misrepresentation has been made by me verbally or in writing, any offer of employment made to me may be withdrawn or my subsequent employment with BCSi may be terminated.

Applicant's Signature

Date

Applicant Release

Please submit a resume with this Employment Application.

BCSi

In connection with my application for employment (including contract for services) and as a condition of continuing employment, I understand that investigative background inquiries are to be made on me including consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, work habits, performance, education, and experience along with reasons for termination of employment from previous employers. Further I understand that the company will be requesting information from various Federal, State, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies.

I authorize without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. I hereby consent to obtaining the above information from BCSi and/or any of their agents. This authorization and consent shall be valid in original, fax, or copy form.

Applicant's Signature

Date