

EMPLOYMENT APPLICATION

(please print all information and then sign on the signature line)

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

We Drug Test

We Maintain a Smoke-Free Workplace

We Participate in E-Verify

This application is not an employment contract, but is intended to evaluate suitability for employment. It is our policy to provide equal employment to all qualified persons without discrimination on the basis of age, race, sex, color, religion, marital status, gender identity, national origin, citizenship, disability, veteran status, or any other status protected under applicable local, state and federal law. It is also our policy to have the option of conducting a pre-employment interview, verifying references, and obtaining a consumer report and/or investigative consumer report which may include a criminal background check as may be permitted by the Fair Credit Reporting Act and/or required by applicable law or regulation before a job offer is made. Once a job offer is made, employment may be contingent upon successful completion of a drug screen test.

PERSONAL INFORMATION

Last Name	First Name	Middle Initia	1			
Home Phone	Work Phone	Cell Phone		Email		
Current Address	Street	Apt.	City	ST	Zip	
		EDUCATION AND T	RAINING			
High School Experience		City, County, State	Did you earn a diploma?			
College Experience		City, County, State	Degree/Diploma			
Γrade, Business or Other School		City, County, State	Degree/Diploma			
		EMPLOYMENT INFO	RMATION			
Position Applied F	For:		Date You	Can Start Work:		
Are you seeking?	Full Time	Part Time	Can you work Weekends		Evenings	
Have you ever app	olied at this Comp	any or been employed	here before	e?		
(If yes, please gi	ive date)			Yes	No	

1) Are you at least 18 years of age at	Yes	No			
Proof of legal eligibility for employment in	the United States will be re	quired upon emplo	yment.		
2) Will you work overtime if asked?					No
Do you have any restriction on working overtime when necessary?					No
If need be, would you have r	eliable transportat	ion to permit	you to wor	k overtime h	ours?
3) Have you been convicted of or sealed by a Court?* If yes, please explain	a felony in the pas	t 5 years whi	ich has not l	een annulled Yes	l, expunged No
*Conviction will not necessarily disqualify screening considering the nature of the crim		•			rgeted
	EMPLOYMENT	T HISTORY			
May we contact your present employ	yer?			Yes	No
Please list below your last three en	nployers beginnin	ng with the r	nost recent	:	
Most Recent Employer	City	State	ZIP	P	hone
Position Held	Dates Fro	Dates From/To P		Pay Rate Upon Leaving	
Supervisor	Duties				
Reason for Leaving					
Next Most Recent Employer	C	ity	State	ZIP	Phone
Position Held	Dates fro	Dates from/To Pay Rate upon Leaving		eaving	
Supervisor	Duties				
Reason for Leaving					
Next Most Recent Employer	City	State	ZIP	P	hone
Position Held	Dates Fro	Dates From/To		Pay Rate Upon Leaving	
Supervisor	Duties				
Reason for Leaving					

JOB-RELATED SKILLS

ning vous applications	
aning voya annligation.	
ering your application:	
that are not related to you and nees not related to you.	
ing for requires driving a motor	
No	
State of Issue:	
'	

APPLICATION FOR EMPLOYMENT RELEASE AND DISCLAIMER

(Please read carefully before signing):

I certify that the information provided by me in this application is true, correct and complete and acknowledge that the facts provided herein by me are subject to verification by Triple BBB, LLC dba Pinstrikes ("Pinstrikes"). I understand that this is simply an application for employment and does not imply I will be employed.

I understand that should any statements by me to Pinstrikes either in my application or after employed (if employed) be found to be false or misleading in any way, then Pinstrikes may refuse to hire or, if hired, terminate my employment.

In order to verify the information that I have presented in this application, I authorize my former employer, school, persons, and other organizations referenced in this application to provide Pinstrikes with any and all information concerning my subjects covered by this application, and I hereby release such parties from all liability from any damages which may result for furnishing such information. If requested I further authorize Pinstrikes and/or its authorized agent to perform a pre-hire investigation check and to pull a credit report on me and agree to provide the necessary authorization. Additionally, I authorize Pinstrikes to supply my employment record, in whole or in part, and in confidence, to any prospective employer, government agency or other party, with a legal and proper interest.

If employed, I agree to conform to all rules and policies as set forth by Pinstrikes. I understand that if I am hired the length of my employment is not guaranteed. Recognizing that I will be free to voluntarily terminate my employment at any time, with or without cause, I acknowledge that my employment and compensation can be modified or terminated with or without cause, and with or without notice, at any time and that I will be an at-will employee.

I acknowledge that I have read all of the above statements and that I understand them.

	Applicant's signature	 Date
(This application is active for 30 days) Date:/		
FOR OFFICE USE ONLY Position(s) applied for:		
Referral Source Advertisement Retrieved on-line application from website Employee Other		
Name of Source (if applicable):		

Applicant's signature

Date

Applicant Release (Disclosure of use for consumer reports)

SECTION 604(a) OF THE FAIR CREDIT REPORTING ACT, 15 U.S.C. 1681b(a) ENUMERATES THE PERMISSIBLE CIRCUMSTANCES

UNDER WHICH A CONSUMER REPORTING AGENCY MAY FURNISH YOUR CONSUMER REPORT TO A THIRD PARTY SUCH AS YOUR EMPLOYER. ONE SUCH PERMISSIBLE PURPOSE LISTED AT SECTION 604(a)(3)(B) IS THAT "ANY CONSUMER REPORTING AGENCY MAY FURNISH A CONSUMER REPORT...TO A PERSON WHICH IT HAS REASON TO BELIEVE INTENDS TO USE THE INFORMATION FOR EMPLOYMENT PURPOSES." THEREFORE, IT IS LAWFUL UNDER FEDERAL LAW FOR THIS EMPLOYER TO SEEK TO OBTAIN FOR EMPLOYMENT PURPOSES A COPY OF YOUR CONSUMER REPORT FROM A CONSUMER REPORTING AGENCY. have read and understand the above notice which Triple BBB, LLC dba Pinstrikes (Pinstrikes or Employer) provided to me on ______, which explains that it is permissible under the Fair Credit Reporting Act for that employer to either procure or cause to be procured, from a consumer reporting agency, a copy of my consumer report to be used for employment purposes. I further understand that the above-mentioned employer will make a request for an investigative report, to include a criminal background investigation. The investigative consumer report will contain information on my character, reputation, personal characteristics, or mode of living. Pursuant to section 606(a)(1)(B) of the Fair Credit Reporting Act, 15 U.S.C. & 1681(a)(1)(B), I understand that I have the right to request a complete and accurate description of the nature and scope of the investigation. (Should you make such a request, such description shall be provided within five (5) days of the request.) I further understand that prior to taking an adverse action Pinstrikes must provide me a "Summary of Consumer Rights" which advises me that I can contact the Consumer Financial Protection Bureau (CFPB) or visit the website at http://www.consumerfinance.gov/learnmore to obtain more information about my rights. I hereby authorize Pinstrikes and/or its agent _______ to procure or cause to be procured a copy of my consumer report and/or investigative consumer report from a consumer reporting agency. This consent authorizes the employer to procure a consumer report and/or an investigative consumer report at any time during my employment for an employment purpose. Date: Signature of Employee or Prospective Employee Social Security Number Date of Birth (for background purposes only) Driver's License Number STATE Current Address: Previous Addresses (last 7 years): Previous Employer's Addresses (last 7 years): Any other names I have been known by (including maiden name): This disclosure further serves as a request that any present or former employer, police department, education or financial institution or other person having personal knowledge about me to furnish Pinstrikes and its affiliates, agents or representatives any and all information requested as allowed by law. A photocopy/facsimile of this authorization may be accepted with the same authority as the original and I specifically waive any written notice from any present or former employer who may provide information based upon this authorized request. Educational institutions are authorized to release my Grade Point Average. I acknowledge that I have read all of the above statements, correctly provided the requested information and that I understand the contents of this form and the authorizations, disclosures and releases I am providing.

Applicant's signature

Date