



KEGMAN

FORM

Human Resources	
Employment Application	
Publication#	HR-400-F1
Effective Date	February 15, 2018

PLEASE ENTER OR PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE	Employment Application	HR-400-F1
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DRUG TESTING IS A CONDITION FOR EMPLOYMENT

Please provide complete and accurate information.
 Willfully providing false information on this application will be considered causes for immediate termination of employment with Kegman.

Name: _____ DATE _____

Last First Middle Maiden

Present address

Number Street City State Zip How Long? years

Telephone Home Cell Email Address

Check if **under the age of 18**

Position applied for (be specific)

Job Number Job Title

Willing to relocate?	Willing to relocate at own expense?	Desired Relocation Cost	Annual Salary Desired (Required Entry)
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Check "ALL" or days and shifts you are available to work (all that apply)

ALL	M	T	W	TH	F	SA	SU	DAYS	SWING	MIDS

Employment desired Full-Time (ONLY) Part-Time (ONLY) Full or Part Time

When available to begin work? _____

Are you willing to travel by air, land or sea (globally) for durations defined in the job posting?	Do you have a passport?
Yes No	Yes No

Conveyance

Do you have a Drivers License Yes No Type: Operator Commercial (CDL) BOTH

Specify other machinery you are licensed to operate (i.e., fork lifts, personnel lifts, etc.): _____

Security

Do you have a security clearance? Yes No Clearance Type and Status: _____

Have you ever been CONVICTED of a crime? Yes No

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.



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EMPLOYMENT HISTORY (Previous Employers)

May we contact your previous employers? Yes No

Last Employer

Company	City/State	Phone	Reason for Leaving	Ending Salary
Job	Supervisor	Supervise Others? Yes No	From	To

Employer #2

Company	City/State	Phone	Reason for Leaving	Ending Salary
Job	Supervisor	Supervise Others? Yes No	From	To

Employer #3

Company	City/State	Phone	Reason for Leaving	Ending Salary
Job	Supervisor	Supervise Others? Yes No	From	To

Personal References we may contact (Up to 3)

Name	Relationship	Phone Number

PLEASE READ CAREFULLY APPLICATION FORM WAIVER

In exchange for the consideration of my job application by KEGMAN INC., I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of KEGMAN, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President or Chief Operating Officer of the Company. Both the undersigned and KEGMAN INC. may end the employment relationship at any time, without specified notice or reason. If employed, I understand that KEGMAN may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give KEGMAN INC. permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release KEGMAN INC. from any liability as a result of such contract.

I also understand that (1) KEGMAN INC. has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, KEGMAN INC. may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, KEGMAN INC. will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.

I further understand that my **employment with KEGMAN INC. shall be probationary for a period of ninety (90) days**, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of Applicant		Date	
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Please Provide Resume

This Company is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age or disability. We assure you that your opportunity for employment with this Company depends solely on your qualifications.