VERTEX OPTICS

Date: _____

Application for Employment

Personal Information

Name: _____   Telephone: _____
    First   *M.I.*   *Last*

Present Address: _____
              Street   *City*   *State*   *Zip*

E-mail address: _____

- If under 18 years of age, do you have a work permit?   ☐ Yes   ☐ No
- Do you have reliable transportation?   ☐ Yes   ☐ No
- Are you legally eligible for employment in the United States?   ☐ Yes   ☐ No

  In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required I-9 employment eligibility verification document form upon hire.

Employment Desired

Position(s) applied for: _____   Date you can start: _____

Are you willing to work overtime?   Yes ☐   No ☐   Pay rate desired: _____

What shifts are you willing to work?   A ☐   B ☐   Are you available to work weekends? Yes ☐   No ☐

Education

Highest Grade Completed (check one):

High School	**College (Undergrad Studies)**	**College (Graduate Studies)**
☐ 9 ☐ 10 ☐ 11 ☐ 12 ☐ GED	☐ 1 ☐ 2 ☐ 3 ☐ 4	☐ _____

Name of last school attended: _____   Degree Obtained: _____

Major and Minor Studies: _____   Awards/Honors: _____   GPA: _____

Professional References

Please give the names of three people not related to you, whom you have known professionally for at least three years.

Name	**Email Address**	**Phone Number**	**Relationship**	**Years Known**
•				
•				
•				

Employment History

List all your work experience (starting with your most recent employer). Please account for all periods of employment and unemployment in this section. You may attach additional sheets of paper as necessary.

Dates Employed		**Employment Information**
From: To:		Name of Employer:
		Address and Phone:
Job Title:		Name of Supervisor:
Describe your job duties:		
Reason for Leaving:		

Dates Employed	Employment Information	
From:　　To:	Name of Employer:	
	Address and Phone:	
Job Title:		Name of Supervisor:
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Dates Employed	Employment Information	
From:　　To:	Name of Employer:	
	Address and Phone:	
Job Title:		Name of Supervisor:
Describe your job duties:		
Reason for Leaving:		

Describe specific skills you have which relate to the job opening: _____

Are you a member of any organizations or associations related to the position for which you are applying? _____

Have you served, or are you serving, in the military? _____

Is there anything else you would like to share? _____

May we contact your present employer at this time?　☐ Yes　☐ No

How did you hear about the job opening for which you are applying? _____

Applicant's Statement

I give the Company permission to contact all or any of my previous employers and references and authorize them to disclose any information the Company may request during its investigation of this application for employment, and I hereby release the Company and such references and prior employers from any and all liability with respect to such disclosures.

I understand that any offer of employment is conditioned upon satisfactory reference and background checks.

I have provided truthful and complete responses to all inquiries in the application and authorize the Company to investigate all statements contained in the application. I understand that the discovery of any falsification or omission constitutes grounds for immediate dismissal or refusal to hire. If employed, I will abide by the Company's rules and regulations, which I understand are subject to change by the Company.

I understand that if I am hired, my employment may be terminated with or without cause or notice, at any time, at either my option or that of the Company.

Date: _____　Applicant's Signature: _____