EMPLOYMENT APPLICATION





Today's Date	Full Na	me (first middle last)		Preferre	ed Name/Nickna	ame
Date of Birth	Social Security Number	Phone	Alternate	Phone	Email Addres	ss
	Street Address		City	State	Zip Code	
Preferred type of jo	bb (check all that apply):	Full Time	Part Time	Tem	porary	
Preferred schedule	(check all that apply):	Weekdays	Weekends	Even	nings	Nights
Have you ever work	ked for KISS ABA?	No	Yes	Dates		
How did you hear a	about us?	Ad	Other		Re	ferral
Do you know anyo	ne who works at KISS ABA?	No	Yes			nployee
Desired Pay:		Hourly	Annı	ıally	iva	me
When are you able	to start work?	Date				
In what local area d	o you prefer to work?					
Desired position:						
Federal law requires to n compliance with the with the Company. In employment authorize	to work in the United States? hat employers hire only individual ese laws, <i>Keeping It Specially Sia</i> this connection, all offers of emp ation, and it will be necessary for y eloyment authorization.	<i>mple, LLC</i> will verif loyment are subject	y the status of ever to verification of th	y individual of e applicant's i	ffered employm identity and	ent
	performing the essential function		Yes	No		
If you are under 18 y	vears of age can you provide a	work permit?	n/a	Yes		No

WORK EXPERIENCE

Please list your most recent job first.

You may skip this Section if emailing your Resume with this Application.



			COMPANY NAME			YOUR PO	OSITION and TITLE
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			NO. & STREET			SUPERV	ISOR'S NAME, TITLE and POSITION
Month	/	Year					
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EDUCATION

NAME AND ADDRESS OF SCHOOL	MAJOR / FIELD OF STUDY	GRADUATION DATE (IF APPLICABLE)	TYPE OF DEGREE OR DIPLOMA
HIGH SCHOOL OR PREP			
COLLEGE			
COLLEGE OR GRADUATE			
OTHER			

PROFESSIONAL DESIGNATIONS

DESIGNATION	ORGANIZATION GRANTING DESIGNATION	DATE COMPLETED
DESIGNATION	ORGANIZATION GRANTING DESIGNATION	DATE COMPLETED

PROFESSIONAL LICENSES

TYPE OF LICENSE	STATE GRANTING LICENSE	LICENSE NUMBER
TYPE OF LICENSE	STATE GRANTING LICENSE	LICENSE NUMBER

REFERENCES Please provide three professional references.

NAME	RELATIONSHIP	COMPANY	PHONE/ALTERNATE PHONE



PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION

I have submitted this 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.

<u>References</u>: I hereby authorize the company and its agents to make <u>such</u> investigations and inquiries 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 <u>liability</u> in responding to inquires connected with my application and I specifically authorize the <u>release</u> 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.

Temporary/Contract Employment: If employed as a temporary or contract employee, I understand that I may be an employee of the company and not of any client. If employed, I further understand that my employment is not guaranteed for any specific time and may be terminated at any time for any reason. I further understand that a contract will exist between the company and each client to whom I may be assigned which will require the client to pay a fee to the company. In the event that I accept direct employment with the client, I agree to notify the Company immediately should I be offered direct employment by a client (or by referral of the client to any subsidiary or affiliated company), either for a permanent, temporary (including assignments through another agency), or consulting positions during my assignment or after my assignment has ended.

SIGNED:	DATF·