

NHVS INTERNATIONAL INC.

Application For Employment

Our policy is to provide equal employment opportunity to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, ancestry, physical or mental disability, or veteran status.

IF APPLICATION IS NOT COMPLETELY FILLED OUT YOU WILL NOT BE CONSIDERED FOR EMPLOYMENT!

Personal Information:

Name: _____
Last First Middle Social Security Number

Present Address: _____
Street City State ZIP Telephone

Permanent Address _____
Street City State ZIP Telephone

Position: _____ Date you can start? _____ Desired Wage: \$ _____

If related to anyone state name and Department? _____
Name: Department

Referred By: _____

18 years of age or older?

Yes	No
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Have you ever been employed with NHVS International Inc. before?

Yes	No
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If so what department did you work in: _____
 Are you willing to work irregular hours, overtime, weekends or different shifts?

Yes	No
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If no explain? _____

Have you ever been convicted of a felony? (This will not necessarily affect your application.)

Yes	No
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If yes, describe conditions: _____

EDUCATION:

School Name and Location Major Degree

Grammar _____

High School _____

College _____

Trade, Business, or correspondence _____

In addition to your work history, are there other skills, qualifications, or experience that we should consider?

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Application for Employment Cont.

Former Employers: (Start with the most recent employer.)

_____ May we contact? Yes No

Date Started: _____ Date Ended: _____ Hourly Rate: _____

Company Name: _____

Address: _____

Position: _____ Reason for leaving: _____ Supervisor Name: _____

_____ May we contact? Yes No

Date Started: _____ Date Ended: _____ Hourly Rate: _____

Company Name: _____

Address: _____

Position: _____ Reason for leaving: _____ Supervisor Name: _____

_____ May we contact? Yes No

Date Started: _____ Date Ended: _____ Hourly Rate: _____

Company Name: _____

Address: _____

Position: _____ Reason for leaving: _____ Supervisor Name: _____

References: Below give the names of three persons not related to you, whom you have known at least one year, and are not previous employers...

Name:	Phone:	Business:	Years Acquainted:

I certify that the facts set forth in this application for employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements on this application shall be considered sufficient cause for dismissal. This company is hereby authorized to make any investigations of my prior educational and employment history.

I understand that employment at this company is "at will," which means that either I or this company can terminate the employment relationship at any time, with or without prior notice, and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager, or executive of this company, other than the president, has authority to alter the foregoing.

Signature: _____ Date: _____

Office Only: Hired: Yes No Start date: _____ Rate: _____

Department: _____