



# SCS Employment Application

Date: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Have you been known by another name? Yes  No  If yes, what name? \_\_\_\_\_

Can you furnish proof that you are 18 years of age or older? Yes  No

If hired, can you furnish proof that you are eligible to work in the United States? (US Govt. E-VERIFY® service used)  
Yes  No  If no, please explain: \_\_\_\_\_

Have you ever been fired, laid off, or asked to resign from a job? Yes  No

If yes, please explain all terminations: \_\_\_\_\_

If extended an offer of employment, are you prepared to take a physical exam, including a drug and alcohol screening, undergo a background investigation, and, if hired, be subject to random drug and alcohol testing?  
Yes  No  If no, please explain: \_\_\_\_\_

Availability:  Full time  Part time  Days  Evenings Start date: \_\_\_\_\_

Salary expectations \$ \_\_\_\_\_

Have you worked for SCS before? Yes  No  If yes, when & job title: \_\_\_\_\_

If hired, you may be assigned to varied duties from time to time. Is there any work you will not perform?  
 Yes  No If yes, explain: \_\_\_\_\_

How did you hear about us?  Internet  Job Fair  Career Counselor  Employee Referral \_\_\_\_\_  
 Newspaper Ad  Other: \_\_\_\_\_

**Your employment application will be considered active for 30 days. To be considered for employment after 30 days, you must reapply.**

**Employment History**  
(Starting with your most recent employer first)

<b>Company Name:</b> _____	<b>Phone:</b> _____
<b>Supervisor's Name &amp; Title:</b> _____	
<b>Beginning pay:</b> _____	<b>Ending pay:</b> _____
<b>Starting Date:</b> _____	<b>Ending Date:</b> _____
<b>Reason for leaving:</b> _____	
<b>Are you eligible for rehire?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If not, why?</b> _____	

<b>Company Name:</b> _____	<b>Phone:</b> _____
<b>Supervisor's Name &amp; Title:</b> _____	
<b>Beginning pay:</b> _____	<b>Ending pay:</b> _____
<b>Starting Date:</b> _____	<b>Ending Date:</b> _____
<b>Reason for leaving:</b> _____	
<b>Are you eligible for rehire?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If not, why?</b> _____	

<b>Company Name:</b> _____	<b>Phone:</b> _____
<b>Supervisor's Name &amp; Title:</b> _____	
<b>Beginning pay:</b> _____	<b>Ending pay:</b> _____
<b>Starting Date:</b> _____	<b>Ending Date:</b> _____
<b>Reason for leaving:</b> _____	
<b>Are you eligible for rehire?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If not, why?</b> _____	

May we contact the employers listed previously?  Yes  No

If no, why not? \_\_\_\_\_

Are you on layoff status and eligible for recall or rehire?  Yes  No

Explain: \_\_\_\_\_

Education	High School	Technical College	College	Graduate School
School Name				
Years Completed	9 10 11 12	1 2	1 2 3 4	1 2 3 4
Did you graduate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Diploma/Degree				

### Professional References

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Years Known: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Years Known: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Years Known: \_\_\_\_\_

Do you plan to work for any other employer or engage in self-employment during your period of employment with SCS?  
Yes No If Yes, please explain \_\_\_\_\_

SCS has policies on sexual harassment and equal employment opportunity, policies which require employees to perform all assigned work and overtime, policies requiring wage or salary deduction authorizations by employees for employer property, debts or monies not returned or repaid, and at-will employment policy, solicitation and distribution policies and policies requiring employees to observe all standards of conduct, policies and work rules of SCS, and for certain employees, confidentiality, non-solicitation and/or non-competition agreement requirements.

Do you agree, if hired, to comply with these and all other current or subsequently adopted SCS policies and requirements?

Yes No If no, please explain \_\_\_\_\_

**Applicant Statement** (Please read and sign if you agree)

1. I certify that the facts set forth in this application for employment are true and complete.
2. I understand that any false or misleading information or significant omission on this application shall disqualify me from further consideration for employment and shall lead to my dismissal from employment if discovered at a later date.
3. I understand if I am hired, I must furnish appropriate documentation establishing my identity and proof of my legal authorization to work in the United States, as required by U.S. law.
4. I agree to immediately notify the company if I should be convicted of a felony or any crime involving dishonesty, breach of trust, controlled substances, sexual misconduct, abuse or violence while my employment application is pending or during my employment, if hired.
5. I authorize SCS (The Company) to make investigations of my qualifications and fitness for employment with the company. Through a separate agency, the company may investigate my academic credentials, prior employment, personal/professional references, and/or criminal record. A report may be prepared summarizing this information. If my prior employers and/or personal references are contacted, the report may include information obtained through interviews regarding my character, general reputation, personal characteristics and/or mode of living. I understand that I may make a written request to obtain a description of the nature and scope of any report that is prepared regarding me. Any request for this information must be in writing and directed to the Human Resources Manager.
6. I authorize any person, school, current employer, past employer(s) and organizations named in this application or job interview to provide The Company with any information and opinion requested by The Company in connection with my application, and I release such persons and organizations from any legal liability and damages in making such statements.
7. I understand that this application does not create a contract of employment between The Company and myself, and if hired, I understand that my employment is governed by the responsibilities of the position and that I am obliged to comply with The Company's current and subsequently adopted or modified personnel policies, procedures and regulations.
8. I understand and agree that, if hired, my employment is at will and is of no definite period of time and may be terminated at any time for any reason, with or without notice. I understand that no supervisor, manager or executive of The Company, other than the CEO and/or President has the authority to alter these terms, and then, only in writing.

Applicant's signature \_\_\_\_\_

Date \_\_\_\_\_

**SCS Elevator Products Inc. (SCS)  
An Equal Opportunity Employer**