



EMPLOYMENT APPLICATION

It is the policy of Sygnetics, Inc. to consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status or disability or any other reason prohibited by federal, state or local law. As an employer and U.S. Government contractor, we comply with applicable Government regulations and affirmative action responsibilities.

Sygnetics, Inc. Is an Equal Employment Opportunity Employer

PLEASE PRINT CLEARLY

NAME: (First, Middle, Last)	PREFERRED NAME:	SOCIAL SECURITY:	TODAY'S DATE:
ADDRESS: (Number, Street, Apt):	City, State, Zip Code:		HOME PHONE:
MAILING ADDRESS IF DIFFERENT: (Number, Street, Apt)	City, State, Zip Code:		CELL PHONE:
POSITION APPLIED FOR:	DATE AVAILABLE TO START:	DESIRED SALARY:	
DESIRED WORK LOCATION:	PERSONAL EMAIL:		
Are you currently authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you under the age of 18? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you able to perform the essential functions of the job for which you are applying, either with or without an accommodation? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If NO, describe the functions that can not be performed:			
Note: Company complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. It is possible that a hire may be tested on skill/agility and may be subject to a medical examination conducted by a medical professional.			
Have you previously been employed by Sygnetics, Inc.? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Dates: From _____ To _____ Location _____		Are you willing to relocate? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, to where? _____	
Have you ever filed an application with Sygnetics, Inc. before? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you applying for: <input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Temporary	
Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you willing to travel overnight on company business? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you currently on "lay-off" status and subject to recall? <input type="checkbox"/> Yes <input type="checkbox"/> No		On what date would you be available for work? _	
How were you referred to Sygnetics?	Ad (Where/When)	Employee (Name)	Other (Specify)
Driving Record			
Do you have a driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No	DRIVERS LICENSE NUMBER:	STATE OF ISSUE:	EXPIRATION DATE:
Have you had any accidents in the past 3 years? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, How many?	Have you had any moving violations in the past 3 years? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Personal References			
NAME:	Occupation:	ADDRESS:	PHONE NUMBER:
NAME:	Occupation:	ADDRESS:	PHONE NUMBER:
NAME:	Occupation:	ADDRESS:	PHONE NUMBER:

PERSONAL INFORMATION

Background

HAVE YOU EVER BEEN CONVICTED OF A FELONY OR A FIRST DEGREE MISDEMEANOR? Yes No

If YES, what Charges? _____

Where convicted? _____ Date of Conviction: _____

HAVE YOU EVER PLED NOLO CONTENDERE OR PLED GUILTY TO A CRIME WHICH IS A FELONY OR FIRST DEGREE MISDEMEANOR? Yes No If Yes, What charges? _____

Where? _____ Date _____

HAVE YOU EVER HAD THE ADJUDICATION OF GUILT WITHHELD FOR A CRIME WHICH IS A FELONY OR FIRST DEGREE MISDEMEANOR? Yes No If yes, What charges? _____

Where? _____ Date _____

Security Clearance

Do you presently hold a Security Clearance? Yes No **If yes, state type and level**

Have you held a Security Clearance in the past? Yes No **If yes, state type and level**

Have you ever been denied a Security Clearance or had one revoked or suspended? Yes No **If yes, explain:**

In the past seven years have you been convicted of or pleaded guilty to a felony, or during the same period of time, have you been released from prison resulting from a felony conviction? (Do not include convictions which have been judicially sealed, expunged or statutorily eradicated). Yes No

If yes, please state the date(s) of such felony conviction(s) and the court(s) of conviction(s).

Military

Did you ever serve in the U.S. Military? Yes No **If Yes, What Branch?** _____

Rank at discharge: _____ **Years of Service:** _____

Note: A "No" answer to the above question will not automatically bar your from employment. The nature and scope of work to be performed to include job requirements for the position for which you are applying are considered for all applicants.

Education

Highschool: (highest grade completed) 9 10 11 12 : _____	Highschool Name, City, State	Year Graduated
College: (highest year completed) 1 2 3 4: _____	College Name, City, State	Year Graduated
College Degree or Major:	Business/Vocational School Name, City, State	

Work History- Previous Employment

From:	Name/Address of Company:	Supervisor:	Phone Number:
To:			
Salary:	Position/Title:	Reason for Leaving:	
	Type of Work:		

From:	Name/Address of Company:	Supervisor:	Phone Number:
To:			
Salary:	Position/Title: Type of Work:	Reason for Leaving:	
From:	Name/Address of Company	Supervisor:	Phone Number:
To:			
Salary:	Position/Title: Type of Work:	Reason for Leaving:	

Work History – Previous Employment/ Temp Employment

From:	Name/Address of Temp Service or Contracting Agency	Supervisor	Phone Number:
To:			
Salary:	Position/Title: Type of Work:	Companies/Agencies where Assigned:	
From:	Name/Address of Temp Service or Contracting Agency	Supervisor	Phone Number:
To:			
Salary:	Position/Title: Type of Work:	Companies/Agencies where Assigned:	

Read Carefully and Sign

I certify that the information provided by me in this application is true and complete to the best of my knowledge and belief. I also understand that if I omit, misrepresent, or provide false statements on this application or any supplements to it, I may not be considered for employment and, if I am subsequently employed, I may be subject to immediate dismissal. If selected for employment, I must produce applicable documents showing that I am a United States citizen or alien lawfully authorized to work in the United States, within the time frame specified by Sygnetics, Inc., to meet the Immigration Reform and Control Act of 1986 requirements.

My employment with Sygnetics, Inc. may be contingent upon my successful completion of a pre-employment examination which includes a blood, urine, and/or other medical tests for alcohol, drugs, and controlled substances. Prior to testing, I agree to sign Sygnetics, Inc's authorization forms wherein I will agree to submit to such testing and to authorize the release of the results to Sygnetics, Inc. Sygnetics, Inc. is a drug-free workplace. Individuals who refuse to take or who fail the drug test, after being informed, will be removed from employment consideration.

To determine my qualifications for employment, I authorize Sygnetics, Inc. to conduct an investigation of my application in order to arrive at an employment decision. I give Sygnetics, Inc. the right to make a thorough investigation of my past employment, education, financial background, military duties, convictions or personal information. I release all persons or entities from all liability for any damages that may result from furnishing information to Sygnetics, Inc. I also release Sygnetics, Inc. and all of its employees from all liability for any damage that may result from Sygnetics, Inc. reliance on the information furnished. I authorize the Company to obtain information regarding my record with the Bureau of Motor Vehicles if the position for which I am applying requires driving. I consent to Sygnetics, Inc. seeking and obtaining any felony conviction record, in accordance with this state's laws, and , and I give consent to the appropriate authorities to provide such information to Sygnetics, Inc. I also understand that a conviction record will not necessarily be a bar to employment, but will be considered in relationship to the position sought; and that factors such as age and time of offense, seriousness and nature of the violation, and rehabilitation will be taken into account. I authorize Sygnetics, Inc.

I realize that any misrepresentation or false information included in the application materials or provided in the interview process can lead to the withdrawal of an offer of employment or to termination from employment. I understand that any future offer of employment may be conditioned upon the results of examinations, physical or other, as may be necessarily required by the Company.

I understand Sygnetics, Inc. has affirmative action programs for equal employment opportunity and will comply with them. In consideration of my employment, I agree to conform to the Company's policies, rules, and regulations. I understand and agree that my employment is at-will, and therefore my employment and compensation can terminate, with or without cause, and at any time, at my option or at the option of Sygnetics, Inc.

_____ Applicant Signature

_____ Date