

Application Form
Performance, Inc.
An Equal Opportunity Employer



Today's Date _____

Please answer all questions. If a question does not apply, write "NA". None of these questions are intended to imply limitations, preferences or discrimination based on age, sex, marital status, race, creed, color, national origin or any sensory, mental or physical handicap that does not interfere with the performance of the position for which you are applying.

Personal Background

Name (please print) _____

Current Address _____

City _____ State _____ Zip _____

Social Security No. _____

Telephone No. Home: _____ Mobile: _____

Do you have the legal right to work in the US? (circle one) Yes No

Are you 18 years of age or older? (circle one) Yes No

Are you a veteran? (circle one) Yes No

Applicants must meet legal age and US work permit requirements.

Salary/Hourly Rate Requirement: \$ _____ Date Available for Employment: _____

Are you seeking full time work? (circle one) Yes No

Please state days/hours available: _____

Are you seeking part time work? (circle one) Yes No

Please state days/hours available: _____

Major fields of employment interest or positions desired:

1) _____ 2) _____

Preferred work locations:

1) _____ 2) _____ 3) _____

Educational Background

1. Name of School _____ Address _____
(High School)

Faculty Reference _____ Dates: From _____ To _____

Diploma/Degree Earned _____ Yes _____ No

Graduation Date _____ Grade Point Average (A=4.0) _____

2. Name of School _____ Address _____
(College or Specialty Programs)

Faculty Reference _____ Dates: From _____ To _____

Diploma/Degree Earned _____ Yes _____ No

Graduation Date _____ College (Major/Minor) _____

Grade Point Average (A=4.0) _____

3. Name of School _____ Address _____
(College or Specialty Programs)

Faculty Reference _____ Dates: From _____ To _____

Diploma/Degree Earned _____ Yes _____ No

Graduation Date _____ College (Major/Minor) _____

Grade Point Average (A=4.0) _____

Extracurricular Activities

Please list any extracurricular activities which may relate to the job you are applying for (high school/college honors, publications, professional societies, athletics, biking knowledge or experience):

Specialized Skills

Please check machines you can operate:

Forklift _____

Personal Computer (Type): _____

Computer Software (Type): _____

Other Skills: _____

Business Experience/Previous Employment

Start with your most recent position. If there are references or prior employers whom you do not want us to contact, please circle their names. Please account for at least the last five years. Include US military experience if it occurred during the last five years.

Are you presently employed? (circle one) Yes No

May we contact your current employer? (circle one) Yes No

Company (1) _____ Type of Business _____

Address _____ Telephone _____

Employed From _____ To _____ Position _____ Rate \$ _____

Type of Work _____ Number Supervised (if any) _____

Supervisor _____ Position of Supervisor _____

State the specific reason(s) for leaving or desiring to change from this position: _____

Company (2) _____ Type of Business _____

Address _____ Telephone _____

Employed From _____ To _____ Position _____ Rate \$ _____

Type of Work _____ Number Supervised (if any) _____

Supervisor _____ Position of Supervisor _____

State the specific reason(s) for leaving or desiring to change from this position: _____

Company (3) _____ Type of Business _____

Address _____ Telephone _____

Employed From _____ To _____ Position _____ Rate \$ _____

Type of Work _____ Number Supervised (if any) _____

Supervisor _____ Position of Supervisor _____

State the specific reason(s) for leaving or desiring to change from this position: _____

Have you worked anywhere else? (circle one) Yes No

If so, please list separately and attach.

References		
Please provide three references who are not related to you and who are not previous employers		
1. Name	Company	Position
Address		Telephone
2. Name	Company	Position
Address		Telephone
3. Name	Company	Position
Address		Telephone
I have previously: ___ Applied for employment Date		
___ Been employed by Performance, Inc. Date		
Position _____		

Referred to Performance by: _____

Performance Employee {please state name(s)}: _____

Other Source (please state referral source): _____

State any additional information which you feel may be useful to us in considering your application.

Authority for Release of Information and Certification of Accuracy and Completeness

This Authority for Release of Information, or copy thereof, constitutes my consent and authorization to any person(s) duly accredited by, and representing Performance, Inc. to obtain any and all information in your files pertaining to me; and with my consent and authorization, the undersigned hereby directs any person(s) or organization to furnish such information upon request of the bearer.

This Authority for Release of Information is executed with full knowledge and understanding that the information is for official use by Performance, Inc., and that the information will be safeguarded against unauthorized disclosures to any agency or individual not having a legitimate need for it.

I hereby release any person(s) or organization, their employees, agents and officials from any and all liability for damages of whatever kind or nature on account of compliance, or any attempts to comply with this Authority for Release of Information.

I certify that the information shown on this application is true and correct to the best of my knowledge. I further agree that the falsification or withholding of pertinent information will be grounds for discharge from employment.

Date _____ Signature of Applicant _____