**THE KINETIC CO., INC.**

AN EQUAL OPPORTUNITY EMPLOYER

**APPLICATION FOR EMPLOYMENT**

Kinetic does not discriminate on the basis of race, religion, color, sex, gender identity, sexual orientation, age, disability, national origin, veteran status or any other basis covered by applicable law.

**Please thoroughly complete the entire application** Date: \_\_\_\_\_\_\_\_\_\_\_\_

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| --- |
| Applicant Information |
| Name (first, middle, last) |
| Address (street, city, state, zip code) Mobile Telephone  ( ) |
| Email Address Home Telephone  ( ) |
| Are there other names under which you have either worked or attended school? Yes No  If yes, please list such names for reference checking purposes: |
| Are you authorized to work lawfully in the United States for The Kinetic Co., Inc.? Yes No |
| Have you ever been convicted of an offense (criminal, municipal or otherwise) or pleaded no contest for any offense or violation other than minor traffic violations? Yes No If yes, (1) identify the conviction(s) and describe the specific circumstances of your offense, (2) provide the date(s) of the conviction, and (3) identify the State(s) in which you were convicted. (Convictions are not an automatic bar to employment.) |
| Do you currently have any pending charges (criminal, municipal or otherwise) against you? Yes ☐No  If yes, (1) describe the circumstances of the offense for which you’ve been charged, (2) provide the date the charge was issued, and (3) identify the County and State in which the charge is pending. |
| Have you ever applied at this company before? Have you ever worked at this company before?  ☐Yes ☐No ☐Yes ☐No if yes, when: |
| **Position(s) Applying For Part-Time Full-Time** |
| **Salary Preference Shift Preference** |
| When can you start? |
| How were you referred to the company?  Agency School \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Social Media Friend/Relative-Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Company Website  Other\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| **Special Skills** |
| 1. Please describe computer proficiency, software knowledge, and office equipment experience and/or manufacturing machines and equipment. |

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| **Education** | | | | | | |
| **School** | **Name and Location** | | **# of years**  **attended** | | **Major Subjects** | **Diploma or Degree Received** |
| **High School** |  | |  | |  | **☐Yes ☐No** |
| **College** |  | |  | |  | **☐Yes ☐No**  **Type** |
| **Graduate** |  | |  | |  | **☐Yes ☐No**  **Type** |
| **Other**  **(Specify)** |  | |  | |  | **☐Yes ☐No**  **Type** |
| **Training Courses** | | | | | | |
| **List any relevant training programs completed.** | | | | | | |
| **Course/Seminar** | | **Organization-Sponsoring** | | **Content** | | **Date(s) Attended** |
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| **Required License(s)** | | |
| Motor vehicle information, please state your:   1. Driver’s License Number 2) State Issued | | |
| Are you licensed with any group, association or society relating to the job for which you are applying? ☐Yes ☐No | | |
| Registration or License Number | State Issued | Expiration Date |

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| **Employment History (start with most recent; use separate sheet if necessary)** | |
| **Name of Employer** | Telephone ( ) |
| Address | |
| Job Title | Employment Dates (month and year)  From To |
| Name of Immediate Supervisor | |
| Description of Duties | |
| Salary---start Salary --- end | Reason for Leaving |
| May we contact as a reference? ☐Yes ☐No | |
| **Name of Employer** | Telephone ( ) |
| Address | |
| Job Title | Employment Dates (month and year)  From To |
| Name of Immediate Supervisor | |
| Description of Duties | |
| Salary---start Salary --- end | Reason for Leaving |
| May we contact as a reference? ☐Yes ☐No | |
| **Name of Employer** | Telephone ( ) |
| Address | |
| Job Title | Employment Dates (month and year)  From To |
| Name of Immediate Supervisor | |
| Description of Duties | |
| Salary---start Salary --- end | Reason for Leaving |
| May we contact as a reference? ☐Yes ☐No | |

|  |  |
| --- | --- |
| **Name of Employer** | Telephone ( ) |
| Address | |
| Job Title | Employment Dates (month and year)  From To |
| Name of Immediate Supervisor | |
| Description of Duties | |
| Salary---start Salary --- end | Reason for Leaving |
| May we contact as a reference? ☐Yes ☐No | |

|  |  |
| --- | --- |
| Employment References | |
| **List individuals familiar with your job qualifications (no relatives or personal friends).** | |
| Name | Telephone ( )  Email Address |
| Address | |
| Relationship | How long known? |
| **List individuals familiar with your job qualifications (no relatives or personal friends).** | |
| Name | Telephone ( )  Email Address |
| Address | |
| Relationship | How long known? |
| **List individuals familiar with your job qualifications (no relatives or personal friends).** | |
| Name | Telephone ( )  Email Address |
| Address | |
| Relationship | How long known? |



**Please Read Carefully Before Signing This Application**

1. I hereby represent that all information contained in this application is true and correct to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment the Kinetic Co. Inc. (the “Company”) or be cause for subsequent dismissal if I am hired.
2. By signing and submitting this application, I authorize the Company to investigate my responses on this application and contact any or all of my former employers or any individuals familiar with me or my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information, whether favorable or unfavorable, about me or my employment. I hereby release the Company from any liability whatsoever arising out of the Company’s efforts to obtain such information about me and further release all other persons, corporations, or entities from liability for furnishing such information to the Company.
3. I understand that upon receiving a job offer, a physical and/or lifting examination and drug screening may be required.
4. Regardless of whether or not I become employed by the company, I recognize this application is not and should not be considered a contract of employment. I understand that employment at the company is on an at-will basis and that my employment may be terminated with or without cause, and without notice, at any time, at my option or the company’s, unless specifically provided otherwise in a written employment contract. I further understand that no company employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than an officer of the company, and then only by means of a signed, written document.

By entering your full name in the boxes below you are hereby agreeing that you have read and understand the above Pre-employment Agreement.

Signed by Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**JURY TRIAL WAIVERS**

READ CAREFULLY BEFORE SIGNING. If Applicant is hired, The Kinetic Co., Inc. and Applicant agree, to the extent permitted by law, to waive a trial by jury in any action, proceeding or counter-claim brought or asserted by either The Kinetic Co., Inc. or Applicant on any matters whatsoever arising out of or related to Applicant’s employment with The Kinetic Co., Inc.

Signed by Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**STATUTE OF LIMITATIONS WAIVERS**

READ CAREFULLY BEFORE SIGNING. SIX (6) MONTH PERIOD TO FILE ANY CLAIMS. If Applicant is hired, Applicant and The Kinetic Co., Inc agree, to the extent permitted by law, that any claim or lawsuit arising out of, or relating to, Applicant’s employment at The Kinetic CO., Inc. must be filed within six months after the claim or lawsuit arises. Applicant and The Kinetic CO., Inc. waive any contrary statute of limitations.

Signed by Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Thank you for your interest in The Kinetic Co.**