

PRECISION H.R.

TEMPORARY EMPLOYMENT APPLICATION

We are an Equal Opportunity Employer. We comply with all applicable Federal, State, and local laws concerning discrimination in employment. No question is intended to elicit information in violation of any such law nor will any information obtained in response to any question be used in violation of any such law.

PERSONAL INFORMATION

DATE		SOCIAL SECURITY NUMBER	
LASTNAME	FIRSTNAME	MIDDLE	MAIDEN (ONLY IF NEEDED TO VERIFY RECORDS)
NAME			
STREET		CITY	STATE ZIP
PRESENT ADDRESS			
STREET		CITY	STATE ZIP
PERMANENT ADDRESS			
HOME #	WORK #	ARE YOU 18 YEARS OR OLDER: YES \ NO	

EMPLOYMENT DESIRED

POSITION	DATE YOU CAN START?
ARE YOU EMPLOYED NOW?	IF SO, MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?
EVER APPLIED TO THIS COMPANY?	WHERE? WHEN?
REFERRED BY	

PLEASE NOTE: ALL DEGREES AND EDUCATION WILL BE VERIFIED

EDUCATION	NAME AND LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE	LIST THE DEGREE RECEIVED	SUBJECTS STUDIED
GRAMMAR SCHOOL					
HIGH SCHOOL					
COLLEGE					
COLLEGE					
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL					

CERTIFICATIONS\LICENSES

CERTIFICATION / LICENSE TYPE:	State

(CONTINUE OTHER SIDE)

PROFESSIONAL HISTORY (BEGINNING WITH THE MOST RECENT, LIST BELOW YOUR LAST FOUR EMPLOYERS)

Start Month/Yr	End Month/Yr	Name and Address of Employer	Start Salary	End Salary	Position	Reason for Leaving
Salary Desired						

PROFESSIONAL REFERENCES

When Precision HR is attempting to staff you at a facility it is common for the facility to inquire about your previous work experience. Please help us develop your profile by supplying references from the facilities you listed above and/or on your resume the requested information about the facilities you have listed on your resume or application. Thank You.

Facility Name	Direct Supervisor & Title*	Phone Number

* At least supply the name of someone at the facility who can give Precision HR a professional reference on you.

MAY WE CONTACT ALL OF THE ABOVE SUPERVISORS?	YES	NO	
WHICH SUPERVISORS WOULD YOU PREFER WE NOT CONTACT?			WHEN MAY WE CONTACT THEM?

HAVE YOU EVER BEEN CONVICTED OF A CRIME YES NO IF YES, EXPLAIN _____
 (MASSACHUSETTS CANDIDATES DO NOT RESPOND TO THIS QUESTION. ALL OTHERS PLEASE RESTRICT ANSWER TO FELONY CHARGES. DO NOT REFER TO EXPUNGED, SEALED OR IMPOUNDED RECORDS.
 CRIMINAL CONVICTION DOES NOT DISQUALIFY APPLICANT FROM CONSIDERATION. "MY SIGNATURE BELOW AUTHORIZES INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION,
 INCLUDING BUT NOT LIMITED TO A CRIMINAL RECORD CHECK.")

INFORMATION RELEASE & NOTIFICATION

I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME. I UNDERSTAND THAT IF I AM HIRED BY COMPANY, I AGREE TO CONFORM TO COMPANY'S RULES AND REGULATIONS, AND I AGREE THAT MY EMPLOYMENT AND COMPENSATION CAN BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE COMPANY'S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITHOUT NOTICE, AT ANY TIME BY THE COMPANY. I UNDERSTAND THAT NO COMPANY REPRESENTATIVES, OTHER THAN ITS PRESIDENT, AND THEN ONLY IN WRITING AND SIGNED BY THE PRESIDENT, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING. I FURTHER RELEASE PRECISION HR AND THEIR EMPLOYEES AND AGENTS FROM ANY LIABILITY FOR THEIR ACTS PERFORMED IN GOOD FAITH AND WITHOUT MALICE IN OBTAINING INFORMATION AND EVALUATING MY APPLICATION. I UNDERSTAND THAT THIS APPLICATION WILL BE ACTIVE FOR A PERIOD OF 30 DAYS FROM ITS COMPLETION. I WILL CONTACT COMPANY AFTER THAT TIME PERIOD, WHEN MY APPLICATION HAS BECOME INACTIVE, IF I WOULD STILL LIKE TO BE CONSIDERED FOR EMPLOYMENT AND THAT I AM REQUIRED TO FILL OUT A NEW APPLICATION."

"I UNDERSTAND THAT, IN CONNECTION WITH THE ROUTINE PROCESSING OF YOUR EMPLOYMENT APPLICATION, THE COMPANY MAY REQUEST FROM A CONSUMER REPORTING AGENCY AN INVESTIGATIVE CONSUMER REPORT INCLUDING INFORMATION AS TO MY CREDIT RECORDS, CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS, AND MODE OF LIVING. UPON WRITTEN REQUEST FROM ME, THE COMPANY, WILL PROVIDE ME WITH ADDITIONAL INFORMATION CONCERNING THE NATURE AND SCOPE OF ANY SUCH REPORT REQUESTED BY IT, AS REQUIRED BY THE FAIR CREDIT REPORTING ACT."

"I HEREBY GRANT PERMISSION TO THE RECEIVER OF THIS DOCUMENT TO RELEASE, TO PRECISION HR, INFORMATION REGARDING MY PAST EMPLOYMENT HISTORY OR TO VERIFY EDUCATIONAL DEGREES, MILITARY SERVICE, PROFESSIONAL CERTIFICATIONS, OR OTHER INFORMATION NEEDED IN THE EVALUATION OF MY APPLICATION WITH THEM. I CERTIFY THAT I HAVE READ AND UNDERSTAND THIS NOTIFICATION AND RELEASE."

SS#

INFORMATION RELEASE FORM

Precision H.R. Solutions, Inc.

APPLICANT COMPLETE THIS BOX ONLY

Pursuant to the Federal Fair Credit Reporting Act, I hereby authorize Precision Human Resource Solutions, Inc. (PHRS) and its designated agents and representatives to conduct a comprehensive review of my background through a consumer report and/or an investigative consumer report to be generated for employment, promotion, reassignment or retention as an employee. I understand the scope of the consumer report/investigative consumer report may include, but is not limited to, the following areas: verification of Social Security number; current and previous residences; employment history, including all personnel files; education; references; criminal history, including records from any criminal justice agency in any or all federal, state or county jurisdictions; motor vehicle records, including traffic citations and registration; and any other public records.

I, _____, authorize the complete release of these records or data pertaining to me which an individual, company, firm, corporation or public agency may have. I understand that I must provide my date of birth to adequately complete said screening and acknowledge that my date of birth will not affect any hiring decisions. I hereby authorize and request any present or former employer, school, police department, financial institution or other persons having personal knowledge of me to furnish PHRS or its designated agents with any and all information in their possession regarding me in connection with an application of employment. I am authorizing that a photocopy of this authorization be accepted with the same authority as the original.

I hereby release PHRS and its agents, officials, representatives or assigned agencies, including officers, employees or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at anytime result to me, my heirs, family or associates because of compliance with this authorization and request to release. You may contact me as indicated below. I understand that a copy of this authorization may be given at any time, provided I do so in writing. I understand that, pursuant to the federal Fair Credit Reporting Act, if any adverse action is to be taken based upon the consumer report, a copy of the report and a summary of the consumer's right will be provided to me.

Name _____ S.S.# _____
(Please print)

Signature _____

EMPLOYMENT VERIFICATION (Please fill in the requested information.)

Dates of Employment: From _____ To _____

Persons Job Title and Duties _____

Please rate the person using the scale: (1=Excellent ● 2=Good ● 3=Fair ● 4=Poor)

____ Attendance ● ____ Ability ● ____ Quality ● ____ Attitude ● ____ Adaptability ● ____ Co-Operation

Reason for leaving _____

Would you re-employ ____ Yes ____ No (please explain in comments section)

Other Comments: _____

DEGREE VERIFICATION (Please fill in the requested information.)

Institution Name _____ Date Received Degree _____
Dated Attended _____
Degree(s) Received _____ Field/Major _____

Signature _____ Title _____ Date _____

PLEASE complete and return to our offices as soon as possible
THANK YOU FOR YOUR COOPERATION