

APPLICANTS STATEMENT AND AGREEMENT

Read carefully before signing this application for employment.

1. I understand that receipt of this application does not imply that I will be employed nor does it indicate that there are positions available.
2. I understand that any future employment may be contingent upon my passing a medical examination. (Medical examinations shall be job related and consistent with business necessity).
3. I hereby grant permission to investigate any of the information included in this application, agree to cooperate in such investigations and release from all liability or responsibility. All persons, organizations, companies, and corporations collecting and supplying such information together with any other information they may have regarding me, whether or not it is in their records.
4. In making this application for employment, I understand that an investigation may be made whereby information is obtained through personal interviews with my neighbors, friends, or other's) with whom I am acquainted. This inquiry includes information as to my character, general reputation personal characteristics, and mode of living. I understand I have the right to make a written request within a reasonable time to receive additional detailed information about the nature and scope of the investigation.
5. I certify the information included in this application is correct and I understand that misrepresentation is just cause for rejection of this application or dismissal from employment.

SIGNATURE

DATE

PRINTED NAME