



APPLICATION FOR EMPLOYMENT

Dickerson & Quinn
267 Guerrero Dr.
Tamuning GU 96913
Tel: 671-649-2706
Fax: 671-649-2750

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify the Administrative Manager.

Position(s) applied for _____ Date of Application _____

Referral Source Advertisement Employee Relative Government Employment Agency
 Walk-in Private Employment Agency Other

Name of source (if applicable) _____

Name (Print) _____
LAST FIRST MIDDLE

Mailing Address _____
STREET / P.O. VILLAGE ZIP CODE

Telephone # _____ Cell/ Beeper/ Other# _____ Social Security# _____

Driver's License number if driving is an essential job function _____ Class _____

If necessary, best time to call you at home is # _____ AM PM Email address _____

May we contact you at work? Yes No

If yes, work number and best time to call # _____ : _____ AM PM

If you are under 18 and it is required, can you furnish a work permit? Yes No

If no, please explain _____

Have you submitted an application here before? Yes No

If yes, give date(s) _____

Are you legally eligible for employment in this country? Yes No

Date available for work _____

Type of employment desired Full-time Part-time Temporary Other _____

Will you travel if the job requires it? Yes No

Are you able to meet the attendance requirements of the position? Yes No

Are you able to work overtime if required? Yes No

EMPLOYMENT HISTORY

Provide the following information for your past employees, assignments or volunteer positions, starting with the most recent (use additional paper if necessary). Explain any gaps in employment in the comments section below.

EMPLOYER	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND RESPONSIBILITIES
	FROM	TO	
TELEPHONE			
ADDRESS	HOURLY RATE / SALARY		
	STARTING		
JOB TITLE	\$	PER	
IMMEDIATE SUPERVISOR / TITLE	FINAL		
REASON FOR LEAVING	\$	PER	
MAY WE CONTACT FOR REFERENCE			
<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER			

EMPLOYER	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND RESPONSIBILITIES
	FROM	TO	
TELEPHONE			
ADDRESS	HOURLY RATE / SALARY		
	STARTING		
JOB TITLE	\$	PER	
IMMEDIATE SUPERIOR / TITLE	FINAL		
REASON FOR LEAVING	\$	PER	
MAY WE CONTACT FOR REFERENCE			
<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER			

EMPLOYER	DATES EMPLOYED		SUMMARIZE THE TYPE OF WORK PERFORMED AND RESPONSIBILITIES
	FROM	TO	
TELEPHONE			
ADDRESS	HOURLY RATE / SALARY		
	STARTING		
JOB TITLE	\$	PER	
IMMEDIATE SUPERIOR / TITLE	FINAL		
REASON FOR LEAVING	\$	PER	
MAY WE CONTACT FOR REFERENCE			
<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> LATER			

Comments (including explanation of any gaps in employment)

Skills and Qualification: summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job related functions in the positions for which you are applying.

EDUCATION

NAME / ADDRESS OF SCHOOL	DIPLOMA	DEGREE	STUDIES

REFERENCES

List name and telephone numbers of three business / work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

NAME	TELEPHONE	YEARS KNOWN

ADDITIONAL INFORMATION

List professional, trade, business or civic associations and any office held.
Exclude memberships which would reveal sex, race, religion, national origin, age, color, disability or any other similarly protected status

ORGANIZATION	OFFICES HELD

List special accomplishments, publications, awards, etc.
Exclude memberships which would reveal sex, race, religion, national origin, age, color, disability or any other similarly protected status.

List any additional information you would like us to consider.

SALARY / HOURLY RATE REQUIREMENTS

If your application receives favorable consideration, what salary/ hourly rate would you require?

\$ _____ per _____



**AFFIRMATIVE ACTION VOLUNTARY
INFORMATION**

Dickerson & Quinn
267 Guerrero Dr.
Tamuning GU 96913
Tel: 671-649-2706
Fax: 671-649-2750

COMPLETION OF INFORMATION BELOW IS VOLUNTARY

We consider all applicants for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/ reserve/ national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

To be completed by applicant on a voluntary basis. Not for interview purposes. To be filed separately from application.

In an effort to comply with requirements regarding government record keeping, reporting and other legal obligations, which may apply, we invite you to complete this applicant data survey. Providing this information is STRICTLY VOLUNTARY. Failure to provide it will not subject you to any adverse personnel decision or action. Your cooperation is appreciated.

PLEASE PRINT

Position(s) applied for _____ Date _____

Referral Source

- | | | |
|---|---|--|
| <input type="checkbox"/> Walk-in | <input type="checkbox"/> Government Employment Agency | <input type="checkbox"/> Private Employment Agency |
| <input type="checkbox"/> Employee | <input type="checkbox"/> Relative | <input type="checkbox"/> School |
| <input type="checkbox"/> Advertisement – Source _____ | | <input type="checkbox"/> Other _____ |

Name of person who referred you, if applicable _____

APPLICANT INFORMATION

Name _____ Telephone _____
LAST
FIRST
MIDDLE

Address _____
STREET / P.O.
VILLAGE
ZIP CODE

- Male Female

Please check one of the following Equal Employment Opportunity Identification Groups:

- | | | |
|--|--|---|
| <input type="checkbox"/> White (not of Hispanic origin) | <input type="checkbox"/> Black (not Hispanic origin) | <input type="checkbox"/> Hispanic |
| <input type="checkbox"/> American Indian / Alaska Native | <input type="checkbox"/> Asian | <input type="checkbox"/> Pacific Islander |

FOR ADMINISTRATIVE USE ONLY

Position(s) applied for _____ Available Not Available
 Other positions considered for _____

Hired _____ Yes No

Position hired for _____ Date of Hire _____

From the EEO job classifications listed below, which one best describes the position filled?

- | | | |
|---|--|--|
| <input type="checkbox"/> Officials and Managers | <input type="checkbox"/> Sales Workers | <input type="checkbox"/> Operatives (semi-skilled) |
| <input type="checkbox"/> Professionals | <input type="checkbox"/> Office and Clerical Workers | <input type="checkbox"/> Laborers (unskilled) |
| <input type="checkbox"/> Technicians | <input type="checkbox"/> Craft Workers (skilled) | <input type="checkbox"/> Service Workers |

Notes: _____

Completed by _____ Date _____



APPLICANT'S STATEMENT

I certify that the information I have given on this application is true and complete. I understand that providing false information or the omission of information will be sufficient grounds for immediate discharge.

I authorize the release of all high school, college and other educational records pertaining to my attendance, course work and other school activities at any educational institution attended by me at any time.

I authorize the disclosure of any and all information relating to my present and former employment, and I request all current and former employees to supply such information to Dickerson & Quinn upon its request. I waive and release my current and former employers from any liability that may arise as a result of providing such information, and waive and release Dickerson & Quinn and its agents from any liability for any actions taken due to information provided by any current or former employer.

I agree that, if hired, I will confirm to all rules, regulations and procedures of Dickerson & Quinn. I further understand and agree that if I am hired, my employment with Dickerson & Quinn is for an indefinite period and may, regardless of the time and manner of payment of my wages and salary, be terminated at any time by Dickerson & Quinn or me, with or without cause and without prior notice of warning.

I further understand that this Application for Employment and any policies and procedures communicated or followed by Dickerson & Quinn during the term of my employment are not intended to be and are not a contract of employment, and that any such policies and procedures may be modified, disregarded or eliminated at any time, with or without notice to me, at the Company's sole discretion.

I understand that this Application for Employment shall be considered active for a period of time not to exceed 90 days from this date and that if I wish to be considered for employment beyond that date, I must submit another employment application.

Signature of Applicant

Date

BACKGROUND RESEARCH RELEASE

Please read this section carefully and acknowledge your understanding by signing your name in the space below.

I certify that all of the statements made by me on this application for employment are true, correct and complete to the best of my knowledge.

1. Consent to Conduct Background Investigation

As a condition of and in consideration for Dickerson & Quinn's consideration of this application, I give permission to Dickerson & Quinn to investigate my personal and employment history. I understand that this background investigation will include, but not limited to verification of all information on this application, as well as interviews with past employers. I further give permission to Dickerson & Quinn to conduct this investigation and to discuss the results of this investigation in connection with my application for employment.

2. Consent to contact Past employers

I give permission to Dickerson & Quinn to contact all employers listed in this application (except those specifically excluded) for references. I further give permission to all current or previous employers and/or managers or supervisors to discuss my relevant personal and employment history with Dickerson & Quinn, consent to the release of such information orally or in writing, and hereby release them from all liability and agree not to sue them for defamation or other claims based upon any statements they make to any representative of Dickerson & Quinn. I further waive all rights I may have under law to receive a copy of any written statement provided by any of my former employers to Dickerson & Quinn. I further agree to indemnify all past employers for any liability they may incur because of their reliance upon this release.

3. Consent to Contact Government Agencies

I give permission to any agent, attorney or representative of Dickerson & Quinn to receive a copy of any information obtained in the file of any federal, state or local court, government agency, law enforcement agency or investigator concerning or relating to me. I further consent to the release of such information. In the event the law does not provide for prospective employers to have access to information, I hereby delegate Dickerson & Quinn as my agent for receipt of information. I understand that the scope of his investigation will be limited to the criminal and/or civil records that relate to my honesty, integrity and/or abilities.

4. Cooperation With Investigation

I agree to fully cooperate in Dickerson & Quinn background investigation, and to sign any waivers or releases that may be necessary to obtain access to relevant information. In the event that any former employer or federal, state, or local government agency will not release reference information or criminal history directly to the employer, I agree to personally request such information to the extent permitted by law.

5. Falsification Statement

I understand that any falsification or willful omission of the fact made in this application or in connection with any background investigation may be sufficient ground for rejection of this application, or, if discovered after an offer of employment, for immediate dismissal.

6. Employment "At Will"

In consideration of my employment, I agree to conform to the rules and regulations of Dickerson & Quinn, and my employment and compensation is "at will" in that they can be terminated with or without cause, and with or without notice, at any time, at the option of either Dickerson & Quinn or myself, except as otherwise provided by law. I understand that no manager or representative of Dickerson & Quinn, other than the President, Vice President or General Manager has authority to enter into any agreement for employment for any specified period of time to make any agreement or contract to the foregoing, and that any promises to the contrary will only be relied upon by me if they are in writing and signed by the President, Vice President or General Manager of Dickerson & Quinn.

Applicant's Signature

Date



Drug Testing Consent Form

I have applied for employment with Dickerson & Quinn LLC and as a condition of employment, I must be and I must remain drug-free. I understand and agree to undergo pre-employment substance screening. I understand that if my pre-employment test results are positive, my application will not be considered further.

I further understand that during the course of any employment with Dickerson & Quinn LLC I agree to be subject to periodic substance screening and if any test are positive, my employment may be terminated.

I hereby authorize any physician, laboratory, or hospital or medical professional retained by Dickerson & Quinn LLC to conduct substance screening and to provide the results to Dickerson & Quinn LLC, and further, that release Dickerson & Quinn LLC and any person affiliated with Dickerson & Quinn LLC and any institution or person conducting the screening, from all liability in connection with the screening.

Applicant Signature

Applicant's Name

Date