

APPLICATION FOR EMPLOYMENT

Please answer all questions. Resumes are not a substitute for a completed application. Please print clearly.

We are an equal opportunity employer. Applicants are considered for positions without regard to veteran status, uniformed service member status, race, color, religion, sex, national origin, age, physical or mental disability, genetic information or any other category protected by applicable federal, state or local laws.

This company is an at-will employer as allowed by applicable state Law. This means that regardless of any provision in this application, if hired, the company or I may terminate the employment relationship at any time, for any reason, with or without cause or notice.

Position(s) Applied For: _____ Phone: _____ Email: _____

______ Date: ______

Present Address:	eet, Apt or Unit #, City, State and Zip		I	How long have y	ou lived there?	Months – Years
	ate:	Full-Time	Part Time ☐ S	Specify hours: _		
Are you willing to work	overtime? Yes \(\square\) No \(\square\)	Date o	n which you can	start work if hire	ed:	
If under the age of 18, ca	n you produce the necessary wor	k certificate at th	ne time of employ	ment? Yes	□ No □	
Have you previously app	blied for employment with New N	Morning? Yes [☐ No ☐ If	yes, when?		
Have you ever been emp (Use back of page if you	loyed by New Morning? Yes need additional space.)] No □	If yes, provide	dates of employ	ment and reason	for separation.
	any other names by which you example, change of name, use of				allow us to con	firm your work and
Education	School Name and Locatio (City, State)	on Co	ourse of Study	Graduate?	Years Completed	Degree/Major
High School	(engy sum)				Co p	
College						
Graduate / Professional						
Trade or Correspondence						
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WORK EXPERIENCE

Please list the names of your present and/or previous employers in chronological order with present or most recent employer listed first. Provide information for at least the most recent ten (10) year period. Attach additional sheets if needed. If self-employed, supply firm name and business references. You may include any verifiable work performed on a volunteer basis, internships or military service. Your failure to completely respond to each inquiry may disqualify you for consideration for employment. Do not answer "see resume."

Employer Name	Address	Type of Business				
Telephone	Dates Employed From	To				
Job Title	Duties					
Supervisor's Name	May we contact? Yes □ No □ If N	To, why not?				
Starting Wage Final	Reason for Leaving					
What will this employer say was the reason you	ur employment terminated?					
Were you ever disciplined? If so, for what?						
How much notice did you give when resigning	? If none, please explain.					
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Telephone	Dates Employed From	То				
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How much notice did you give when resigning	? If none, please explain.					
volunteer-related references.	red references we may contact. Individuals w	with no prior work experience may list school or Work Relationship Telephone				
1		<u> </u>				
Please list the names of personal references (no	1 1	·				
Name Occ	cupation Address	Telephone # Years Known				
		<u> </u>				

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APPLICANT CERTIFICATION

I understand and agree that if driving is a requirement for the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license for the state in which I reside and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

I understand that the company may now have, or may establish, a drug-free workplace or a drug and/or alcohol testing program consistent with applicable federal, state and local law. If the company has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state and local law. I also understand that all employees of the location, pursuant to the company's policy and federal, state and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or illegal or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and/or drug testing consistent with the company's policies and applicable federal, state and local law.

If employed by the company, I understand and agree that the company, to the extent permitted by federal, state and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles and computers) and, in certain circumstances, my personal property.

I understand and agree that as a condition of employment and to the extent permitted by federal, state and local law, I may be required to sign a confidentiality, restrictive covenant, and/or conflict of interest statement.

I certify that all the information on this application, my resume and any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment, or if employed, disciplinary action, up to and including immediate dismissal.

THIS COMPANY IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY OR I MAY TERMIATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE. NOTHING IN THIS APPLICATION OR IN ANY DOCUMENT OR STATEMENT, WRITTEN OR ORAL, SHALL LIMIT THE RIGHT TO TERMINATE EMPLOYMENT AT-WILL. NO OFFICER, EMPLOYEE OR REPRESENTATIVE OF THE COMPANY IS AUTHORIZED TO ENTER INTO AN AGREEMENT, EXPRESS OR IMPLIED, WITH ME OR ANY APPLICANT FOR EMPLOYMENT FOR A SPECIFIED PERIOD OF TIME UNLESS SUCH AN AGREEMENT IS IN A WRITTEN CONTRACT SIGNED BY THE PRESIDENT OF THE COMPANY. IF HIRED, I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF THE COMPANY, AND I UNDERSTAND THAT THE COMPANY HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL.

I authorize the company or its agents to confirm all statements contained in this application and/or resume as it relates to the position I am seeking and to the extent permitted by federal, state or local law. I agree to complete any requisite authorization forms for the background investigation which may be permitted by federal, state and/or local law. If applicable and allowed by law, I will receive separate written notification regarding the company's intent to obtain "consumer reports."

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. I hereby release, discharge, and hold harmless, to the extent permitted by federal, state and local law, any party delivering information to the company or its duly authorized representative pursuant to this authorization from any liability, claims, charges or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the company and its representatives for seeking such information and all other persons, corporations or organizations furnishing such information. Further, if hired, I authorize the company to provide truthful information concerning my employment to future employers and hold the company harmless for providing such information.

If hired by this company, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this company. I also understand this company employs only individuals who are legally eligible to work in the United States.

legal guardian constitutes acknowledgement by the local law, can test the applicant for illegal or control personnel who need to know, the applicant, and the a	olled substances, conduct inspections of property without notice, and communicate te	
	d consent must be signed by the applicant's parent or legal guardian. Signature by the	
Applicant Signature	Date	
DO NOT SIGN UNTIL YOU HAVE READ A	ALL OF THE INFORMATION CONTAINED IN THE APPLICATION.	
I CERTIFY THAT ALL OF THE INFORMA' COMPLETE.	ATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE, A	ACCURATE, AND

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