



SYSTEMS EAST INC. ♦ P.O. Box 1007 ♦ Newport News, VA 23601
Phone (757) 766-8400 ♦ Fax (757) 766-7494

Request, Authorization, Consent, and Release Statement

I understand that in conjunction with my application for employment, Systems East Inc. may research and verify the information I have provided in my application for employment including, but not limited to, my personal background, character, professional standing, work history, and qualifications. The agency will provide a written report of the findings to Systems East Inc. when requested.

In connection with this request, I authorize all corporations, companies, former and current employers, educational institutions, law enforcement agencies, state motor vehicle departments, city, state, county, and federal courts, military services, and persons to release information they may have about me to Systems East Inc. or it's agent with which this form has been filed and release all parties involved from any liability and responsibility for doing so.

I also authorize the procurement of an investigative consumer report and/or consumer credit report understand that it may contain information about my background, mode of living, character, criminal record information, workers' compensation information, driving record, and personal reputation. This authorization, in original or copy form, shall be valid for this and any future reports or updates that may be requested. Systems East Inc. will notify me if employment is denied because of information obtained from a reporting agency. Additionally, I understand that if requested within 60 days, I will be given a full and accurate disclosure as to the nature and substance of all information provided to Systems East Inc.

The following information is required when checking public records. It is confidential and will not be used for any other purposes. I hereby release Systems East Inc. and all persons, agencies and entities providing information or reports about me from any and all liability arising out of the request or release of any of the above mentioned information or reports.

(Signature)

(Date)

PLEASE PRINT CLEARLY:

(Last Name include Jr.,Sr.,II,III, etc)
(Maiden Name)

(First Name)

(Middle Initial)

(Current Address) # & Street
How Long?_____

City

State

Zip

(Former Address) # & Street
How Long?_____

City

State

Zip

(Former Address) # & Street
How Long?_____

City

State

Zip



Application for Employment

SYSTEMS EAST INC. ♦ P.O. Box 1007 ♦ Newport News, VA 23601
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Pre-Employment Questionnaire Equal Employment Opportunity Employer

Date: _____

Personal Information

Name: _____

Date of Birth: _____ SSN#: _____

Present Address: _____

Permanent Address: _____

Permanent Telephone: _____ Work Telephone: _____

Employment Position Desired: _____

Date Available to Start: _____ Salary Desired: _____

Are you able to perform the functions of the job for which you are applying with or without reasonable accommodation? _____ If no, please explain: _____

Are you able to work over-time when needed? Yes No

Are you currently employed? Yes No

If so, may we inquire with your present employer? Yes No

Have you ever been dismissed or forced to resign from any employment? Yes No

If yes, please explain: _____

Have you ever applied to this company before? Yes No

If so, where? _____ When? _____

Do you have a friend or relative who is currently employed here or at a related entity?

List names and relationship to you: _____

Are you eligible for employment in the United States? Yes No

(If offered employment, you will be required to provide documentation to verify identity and eligibility.)

If less than 18 years of age, can you furnish a work permit? Yes No I am at least 18.

Do you have a Drivers' License? Yes No **Drivers' License No.:** _____

Have you ever had your driving privileges revoked or suspended? Yes No

If yes, please explain: _____

Have you been convicted of a crime? Yes No If yes, give dates and explain: _____

(A conviction record will not necessarily be a bar to employment. Factors such as your age at the time of the offense, the seriousness and nature of the offense, rehabilitation and relaxation of the offense to employment will be taken into consideration.)

Education

◆ High School:

Name and Location of School: _____

Did you graduate? _____ Subjects Studied: _____

◆ College:

Name and Location of School: _____

Did you graduate? _____ Subjects Studied: _____

◆ Trade, Business, or Correspondence School:

Name and Location of School: _____

Did you graduate? _____ Subjects Studied: _____

◆ Are you a veteran of the U.S. Military? Yes No

If yes, list Branch of Service and dates: _____

◆ Subjects of Special Study, research work, or special training skills: _____

◆ Do you read, write, or speak any languages, other than English fluently? _____

Employment History

(List below your last three employers, starting with your current or most recent employer.)

Employer #1 Dates of Employment (Month/Year): _____

Name: _____ Phone Number: _____

Address: _____

Title and Duties Performed: _____

Salary: _____ Reason for Leaving? _____

May we contact this employer? _____

Employer #2 Dates of Employment (Month/Year): _____

Name: _____ Phone Number: _____

Address: _____

Title and Duties Performed: _____

Salary: _____ Reason for Leaving? _____

May we contact this employer? _____

Employer #3 Dates of Employment (Month/Year): _____

Name: _____ Phone Number: _____

Address: _____

Title and Duties Performed: _____

Salary: _____ Reason for Leaving? _____

May we contact this employer? _____

References

Give the names of at three persons, not related to you, whom you have known at least one year.

1. Name: _____

Address: _____

Telephone Number: _____ Business: _____

2. Name: _____

Address: _____

Telephone Number: _____ Business: _____

3. Name: _____

Address: _____

Telephone Number: _____ Business: _____

Signature: _____ Date: _____

Employment applications are retained in the Company's active file for 30 days only. Applicants must reapply after that time if they are still interested in employment with the Company.

DO NOT WRITE BELOW THIS LINE -----

Interviewed by: _____ Date: _____

Remarks: _____

Hired? _____ Position: _____ Can report: _____

Salary: _____ Manager's Signature: _____

Approved: _____ (Dept Head) Drug Test Run: _____

Hire Vu Date: _____ Faxed to Corporate Office: _____

Background Authorization Form

Personal Information

Name: _____ SSN: _____

**Previous Names Used: _____

Current Home Address: _____

How long have you lived at current address? _____

Previous Address: _____

How long? _____

Date of Birth: _____ Drivers License No: _____ State: _____

Have you ever been convicted of a crime other than minor traffic offenses? Y _____ N _____

If yes, proved explanation:

Year of offense: _____ County offense was committed: _____

Offense Description _____

***THIS INFORMATION IS REQUIRED IN ORDER TO CONDUCT AN ACCURATE CRIMINAL BACKGROUND SEARCH AND WILL NOT BE USED AS CRITERIA IN THE HIRING PROCESS, AS DESCRIBED BY THE AGE DISCRIMINATION ACT OF 1967.*

In connection with my application and/or continued employment, (including contract for services) with you, I understand that investigative background inquiries are to be made on myself including consumer investigative criminal convictions. Further, I understand that you will be requesting information from various Federal, State, and other agencies, which maintain records concerning my past activities relating to any criminal experiences.

I acknowledge that I have been counseled that a person or entity may not procure or cause to be prepared an investigative consumer report on any consumer unless it is clearly and accurately disclosed to the consumer, that an investigative consumer report – including all applicable information as to his or her character, general reputation, personal characteristics, mode of living, education history, driving history, employment history and credit history – may be made. If you're are denied employment because of the consumer investigation, it is your right under the Fair Credit Reporting Act (Law 91-508) SS 606. to have the name of the agency or agencies from whom information concerning you was obtained. You are also entitled to receive free copies of the information supplied by those agencies within sixty days upon written request. You have the right to directly dispute with the consumer reporting agency the accuracy and completeness of any information furnished by that agency.

I authorize without reservation, any party or agency contacted by this employer to furnish the above mentioned information.

I release SYSTEMS EAST INC. and any other person and/or agency from any suits, liens, judgments, damage and/or liability resulting from this process.

The above information is used solely for inquiries and criminal history checks.

Falsifying any information on this release form will constitute grounds for immediate dismissal or declining any pending job offers.

Applicants Signature: _____

Date: _____