

Harrison & Lear Inc.

Employment Application Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status

		Applicar	t Information					
Full Name:					Date:			
Address:	Last	First		M.I.				
Address.	Street Address			Apartment/Unit #				
	City			State	ZIP Cod	 le		
Phone: ()	E-	mail Address:					
Date Available: Social Security No.: Desired Salary: \$								
Position App	lied for:	V/50 NO				\/F0	NO	
Are you a cit	izen of the United States?		— · · · •					
Have you ev	er worked for this company?	YES NO	If yes, when?					
Have you ev	er been convicted of a felony	? YES NO						
If yes, explai	n:							
		Ed	ucation					
High School:		Address						
From:	To:	Did you graduate	?	Degree:				
College:		Addres						
From:	To:	Did you graduate	?	Degree:				
Other:		Address	S:					
From:	То:	Did you graduate	?	Degree:				
		Ref	erences					
Please list th	hree professional reference	S.						
Full Name:			Relationship:					
Company:				Phone: ()			
Address:								
Full Name:			Relationship:					
Company:				Phone: ()			
Address:								
Full Name:			Relationship:					
Company:			•	Phone: ()			
Address:				•	-			

Pre	vious Employ	yme	nt			
Company:			Phone:	()	
Address:			Supervisor:			
Job Title: St	arting Salary:	\$		Endin	g Salary:	\$
Responsibilities:						
From: To: Reason	n for Leaving:					
May we contact your previous supervisor for a reference?			NO			
Company:			Phone:	()	
Address:			Supervisor:			
Job Title: St	arting Salary:	\$		Endir	g Salary:	\$
Responsibilities:						
From: To: Reason	n for Leaving:					
May we contact your previous supervisor for a reference	ce? YES		NO			
Company:			Phone:	()	
Address:			Supervisor:			
Job Title: St	arting Salary:	\$		Endir	g Salary:	\$
Responsibilities:						
From: To: Reason	n for Leaving:					
May we contact your previous supervisor for a reference	e?		NO			
	Military Servi	се				
Branch:			From:		To:	
Rank at Discharge:	Тур	ре о	f Discharge:			
If other than honorable, explain:						
Discl	aimer and Sig	gnat	ture			
The information provided in this Application for Employment is true, correct, and complete. If employed, any misstatements or omission of fact on this application may result in my dismissal. I further understand that a drug test will be required prior to employment. Furthermore, I understand that acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.						
If you decide to engage an investigative consumer report (Employment Screening) to report on my credit and personal history I authorize you to do so. If a report is obtained you must provide, at my request, the name of the agency so I may obtain from them the nature and substance of the information contained in the report.						
Signature:				Date:		

Notice and Authorization of Use of Consumer Reports for Employment Purposes

	th HARRISON & LEAR INC. a consumer report and/or be obtained for employment purposes when evaluating your reassignment, and / or retention.
obtain a consumer report and / or	, hereby authorize HARRISON & LEAR INC. to investigative consumer report on myself for the purpose of yment, promotion, reassignment, and / or retention with
standing, character, general reputat acknowledge that such information who has knowledge of such informal understand that I have the right to and scope of any investigative conthe federal trade commission's sum I authorize and request every personal college, university, school district, of other entity having control or possessions.	include information bearing upon my credit worthiness, credit on, personal characteristics, and / or mode of living. I further may be obtained through personal interviews with any personation. request the complete and accurate disclosure of the nature sumer report performed, and hereby acknowledge receipt of nary of consumer rights enclosed herein. on, firm, company, corporation, governmental agency, court, or other education institution, law enforcement office, and any sion of any information pertaining to me or my background to complying information for the purpose indicated herein.
Date:	Applicant's Signature:
Social Security Number:	** Printed Name:
Current Address:	
Previous Address:	
Date of Birth:	**
Home Phone:	**
Cell Number:	**

^{**} Responses to these questions are completely voluntary. You need not respond to have your application considered. However, without this information, we may be unable to distinguish you from another in the event we discover adverse information during our background investigation.