

Medallion Management, Inc.

APPLICATION FOR EMPLOYMENT

(PRE-EMPLOYMENT QUESTIONNAIRE) (AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL INFORMATION		DRIVERS				
NAME		LICENSE# S.S. #				
LAST	FIRST	MIDDLE				
EMAIL ADDRESS						
DDEGENE A DDDEGG						
PRESENT ADDRESS STR	EET	CITY		STATE	ZIP	
PHONE NO.		ARE YOU 18 YEAR:	S OR OLDER	YES	NO	
EMPLOYMENT DESIRED		DATE YOU		CALADY		
POSITION		CAN START		SALARY DESIRED		
ARE YOU EMPLOYED NOW?	IF SO MAY WE INQUIRE PLOYED NOW? OF YOUR PRESENT EMPLOYER?					
EVER APPLIED TO THIS COMP.	ANY BEFORE?	WHERE?		WHEN?		
EDUCATION	NAME AND LOCAT	ION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED	
HIGH SCHOOL					_	
COLLEGE						
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL						
* The Age Discrimination in Emplage.	oyment Act of 1967 prohibits d	liscrimination on the basis o	f age with respect t	o individuals who are	at least 40 but less than 70 years of	
GENERAL SUBJECTS OF SPECIAL STUDY	OR RESEARCH WORK					
U.S. MILITARY OR NAVAL SERVICE?		RANK	<u> </u>			
PRESENT MEMBERSHIP IN NATIONAL GUARD OR RESER						
HAVE YOU EVER BEEN CONVI	CTED OF A FELONY OR SE	RIOUS MISDEMEANOR	WHICH RESULTI	ED IN A CONVICTION	ON?	

FORMER EMPLOYERS	S (LIST BELOW LA	AST FOUR EMPLOYERS. STARTING	G LAST ONE	FIRST.)				
DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER		SALARY		POSITION	N REA	REASON FOR LEAVING	
FROM								
TO FROM								
ТО								
FROM TO								
FROM								
TO								
REFERENCES: GIVE THE	HREE PERSONS	NOT RELATED TO YOU. WHO	M YOU HA	VE KNOWN AT	LEAST ONE YEA	AR.		
NAME		ADDRESS			BUSINESS		YEARS	
	NAME ADDRESS			DOSINESS			ACQUAINTED	
PHYSICAL RECOR	D.							
		ONS THAT PRECLUDE YOU FRO	OM PERFOR	RMING ANY WO	ORK FOR WHICH	YOU ARE BEIN	G	
CONSIDERED?	YES	NO						
IF YES, WHAT CAN BE DON	NE TO ACCOMM	IODATE YOU LIMITATION?						
PLEASE DESCRIBE:								
IN CASE OF								
EMERGENCY NOTIFY	NAM	E	ADDRES	5		PHONE NO.		
*I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.							AND UNDERSTAND	
I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL								
INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THAT THEY MAY HAVE, PERSONAL OR								
OTHERWISE, AND RELEASE ALL PARTIES FROM LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SHAME TO YOU.							0 100.	
AUTHORIZATION WILL INCLUDE CREDIT AND CRIMINAL CHECKS FOR INDIVIDUALS HAVING ACCESS TO KEYS AND MONEY.								
I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINATE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PRIOR NOTICE.								
OF MIT WAGES AND SALAKT, DE TERMINATED AT ANT TIME WITHOUT ANT FRIOR NOTICE.								
DATE		SIGNATURE						
		DO NOT WRITE	E BELO	W THIS L	INE			
9. DATE HIRED			01. EMPLO	YEE NUMBER				
07. PROJECT NAME			POSITION					
8. DATE BORN				AL STATUS	S	M D	W	
				51111 05	<u> </u>	D	**	
29. EXEMPTIONS			STATUS					
	.03 STREET				04. CITY			
	05. STATE				06. ZIP			
	OJ. DIMIL				00. Zif			



AUTHORIZATION FOR CREDIT, CRIMINAL HISTORY AND SEX OFFENDER CHECK

Date _			
Name: First	Middle	Last	_
Address _			
Date of Birth			
_			
`			
Are you or any m	nember of your household subject to the	e Lifetime Sex Offender Registration in any state?	
Please list all stat		ber has <u>ever</u> resided; use additional paper if needed.	
registration and		nvestigate my credit status, criminal history, sex off nation relative to my credit and criminal standing pas dallion Management, Inc.	
which owner or		ng a collection agency) to obtain by consumer credit reports of collect past due rent payments, late fees, or other char.	
Signature:		Date:	
		run sex offender check Development Code:	

E