

Supervisor's Name	May we contact this person? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving:	

Company Name:	Employed from _____ to _____
Address:	Telephone:
Job Title and Brief Description:	Monthly Salary: Beginning _____ Last _____
Supervisor's Name	May we contact this person? <input type="checkbox"/> Yes <input type="checkbox"/> No
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PLEASE LIST ANY ADDITIONAL INFORMATION/TRAINING THAT RELATES TO YOUR ABILITIES TO PERFORM THE JOB FOR WHICH YOU ARE APPLYING? _____

REFERENCES (DO NOT INCLUDE RELATIVES)

NAME	ADDRESS/TELEPHONE NUMBER	BUSINESS	YEARS ACQUAINTED

APPLICANT'S STATEMENT

I understand that Rajkowski Hansmeier Ltd. follows an "employment at will" policy, in that I or the employer may terminate my employment at any time, or for any reason consistent with applicable state or federal law; this "employment at will" policy cannot be changed verbally or in writing, unless the change is specifically authorized in writing by the Managing Partner of this organization. I understand that this application is not a contract of employment. I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit satisfactory proof of employment authorization and identity; failure to submit such proof will result in denial of employment.

I understand that the employer will thoroughly investigate my work and personal history and verify all data given on this application on related papers, and in interviews. I authorize all individuals, schools, and firms named therein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information.

I certify that all the statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

Applicant's Signature: _____ Date: _____