

# Application for Employment



## Client/Employee Information

Client ID*	Client Name*				
Position Applying For*					
Last Name*	First Name*	Middle Name*	Phone Number*		
Street Address*					
City*	State*	Zip Code*	E-mail Address		
Emergency Contact Name		Emergency Contact Relationship		Emergency Contact Phone Number	
Type of Driver's License Operator	Commercial Operator	Driver's License Class	Driver's License Operator Number	State Issued	

## Education and Training

High School Name(s)	City, State	College Name(s)	City, State	Other Name(s) (please specify)	City, State
Degree	Graduated? yes      no	Degree	Graduated? yes      no	Degree	Graduated? yes      no
Last Year Completed 1      2      3      4		Last Year Completed 1      2      3      4		Last Year Completed 1      2      3      4	
Additional Skills					
Professional Certifications and/or Technical Designations			Name of Institution, City, State		

## Employment History (please complete the information requested below for your last three employers, starting with the present or most recent company)

Employer Name	Hire Date	End Date		
Address	Supervisors Name	Supervisors Phone Number		
City	State	Zip	Job Title	Salary
Job Description	Reason for Leaving			
Employer Name	Hire Date	End Date		
Address	Supervisors Name	Supervisors Phone Number		
City	State	Zip	Job Title	Salary
Job Description	Reason for Leaving			
Employer Name	Hire Date	End Date		
Address	Supervisors Name	Supervisors Phone Number		
City	State	Zip	Job Title	Salary
Job Description	Reason for Leaving			

Return completed form via e-mail at [input@odysseyonesource.com](mailto:input@odysseyonesource.com) or fax to 817.508.PE02.

# Application for Employment (continued)

## Professional References

Reference 1 Last Name	Reference 1 First Name	Reference 2 Last Name	Reference 2 First Name	Reference 3 Last Name	Reference 3 First Name
Phone Number		Phone Number		Phone Number	
Company		Company		Company	
Job Title		Job Title		Job Title	
Address		Address		Address	
City	State	Zip	City	State	Zip

## Other Information

<b>1. Are you currently authorized to work in the U.S.?<sup>†</sup></b>	yes	no
<b>2. Have you previously been employed by Odyssey OneSource?<sup>*</sup></b>	yes	no
If yes, what company?	Company Name	
<b>3. Will you abide by the safety rules of this company?<sup>*</sup></b>	yes	no
<b>4. Have you ever been convicted of, found guilty of, plead guilty to, had adjudication withheld or plead no contest to a felony or misdemeanor?<sup>‡</sup></b>	yes	no
If yes, please explain.		

**\* Required Information**

<sup>†</sup> A no answer will not necessarily disqualify you from consideration.

<sup>‡</sup> A conviction will not necessarily bar you from employment but will only be considered in relation to specific job requirements. Each conviction will be judged on its own merits with respect to time, circumstances and seriousness.

<sup>‡</sup> This does not include a minor traffic violation misdemeanor.

If hired, federal law requires that you furnish documentation showing your identity and that you are legally authorized to work in the United States.

## Equal Opportunity Employer

Odyssey One Source, Inc. (hereafter the Company) is an equal opportunity employer and does not discriminate in recruitment, hiring, training, promotion, or other employment policies on the basis of age, race, sex, color, religion, national origin, physical or mental handicap, veteran status, or any other basis that is prohibited by federal, state, or local law. No question in this application is intended to secure information to be used for such discrimination. This application will be given every consideration, but its receipt does not imply that the applicant will be employed.

## Signature

Signature <sup>*†</sup>	Date <sup>*</sup>
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**\* Required Information**

<sup>†</sup> By signing above, I hereby certify that all of the information provided by me in this application is correct, accurate and complete to the best of my knowledge. I understand that the misrepresentation or omission of any facts in the application will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

Return completed form via e-mail at [input@odysseyonesource.com](mailto:input@odysseyonesource.com) or fax to **817.508.PE02**.