

How did you learn about this position?			
[] Friend [] Employment Dept [] Advertisement (specify source)	[] Walk-In [] Other:		[] Website
Last Name First	t Name	M	iddle Name
		1	
Address	Phone #	Email	
City Sta	te	<u> </u>	Zip
Have you ever filed an application with Zelham, In If yes, please give date:			[] Yes [] No
Do any of your friends or relatives work here? If yes, please give name, relationship and position:			[]Yes []No
Have you ever been employed with Zelham, Inc. b If yes, please give date and position:			[] Yes [] No
Are you at least 18 years of age? If you are under 18 years of age, you may need to	provide proof of your eligil	oility to work	[] Yes [] No
Are you eligible to work in the US?			[] Yes [] No
Are you currently employed? If yes, may we contact your current employer?			[] Yes [] No [] Yes [] No
Are you currently on lay-off status and subject to re	ecall?		[] Yes [] No
Will you travel if a job requires it?			[] Yes [] No
Have you ever been convicted of a crime?			[] Yes [] No
If yes, please give date and reason for conviction:			
(All positions at ZELHAM, INC. are subject to a Criminal B	ackground Check.)		
Are you capable of performing, with or without rea the essential duties of the job for which you are ap you have read the job description.)		ess	[] Yes [] No
Date available for work:			
What is your desired salary range?			

Position you are seeking (you must fill out one application for each position you are applying for)

Zelham, Inc. will not consider incomplete applications. All applicants must complete an application even when submitting a resume.



Shift Availability

Can you work any shift? [] Yes [] No Please check your availability to work: []Regular Full-Time [] Regular Part-Time at _____hours/week []Temp/Seasonal Full-Time [] Temp/Seasonal Part-Time at _____hours/week []Mornings [] Afternoons [] Evenings [] Weekends [] Sundays

Education & Training

School	Name, City & State of School	Course of Study	# Years	Diploma/Degree
High School				[] Yes No
Undergraduate School				[] Yes [] No
Graduate School				[]Yes []No
Other (Specify)				[] Yes [No

Please state any additional information and skills you feel may be helpful to us in considering your application:



PLEASE NOTE:

Complete this section even if you are attaching a resume, begin with your most recent position.

Employer:	Dates Employed		Work performed/Responsibilities:	
	From:	To:		
Job Title:				
Employer Location (City, State):	Annual Salary:			
	Start:	End:		
Supervisor:			May we contact? [] Yes [] No	
Supervisor Telephone Number:				
Supervisor Job Title	Reason for leavir	ng:		

Employer:	Dates Employed		Work performed/Responsibilities:
	From:	To:	
Job Title:			
Employer Location (City, State):	Annual Salary:		
	Start:	End:	
Supervisor:			May we contact? [] Yes [] No
Supervisor Telephone Number	:		
Supervisor Job Title:	Reason for leavir	ng:	



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	From:	To:	
Job Title:	-		
Employer Location (City, State):	Annual Salary:		
	Start:	End:	
Supervisor:			May we contact? [] Yes [] No
Supervisor Telephone Number	•		
Supervisor Job Title:	Reason for leavir	ng:	

Professional/Business References – Please do not include family members.

Name	Address & Phone Number	Occupation	
1.			
2.			
3.			

Applicant's Certification – Please read this carefully before signing the application!

- Zelham, Inc. is an equal opportunity employer and will consider applicants for all positions without regard to race, age, color, religion, marital status, nation origin, disability, veteran status or any other legally protected status.
- No applicant will be rejected as a result of any impairment, which, with reasonable accommodation, does not prevent performance of the work.
- Zelham, Inc. will not tolerate sexual harassment or harassment on the basis of any protected class status in the workplace.
- Lunderstand that, if selected, Lwill be required to provide proof of my identity and legal right to work in the United States prior to actual employment at Zelham, Inc.
- I certify that I have answered truthfully and have not knowingly withheld information relative to my application. I understand that any
 misrepresentation or material omission on the application will result in my being eliminated from further consideration. I further understand that, if
 accepted for employment, any misrepresentation or material omission that becomes known to Zelham, Inc. may result in immediate termination of my
 employment.
- I hereby authorize all previous employers and supervisors, including all persons with and for whom I have worked, to give Zelham, Inc.'s representative's any and all information regarding me and my previous employment. I release Zelham, Inc. and all previous employers and supervisors from liability for any damages that may result from furnishing information to Zelham, Inc.
- In consideration of my employment, I agree to adhere to all existing and future instructions, rules and policies of Zelham, Inc. I also understand that Zelham, Inc. reserves the right to change wages, hours and working conditions as deemed necessary and that no representative of Zelham, Inc. has any authority to enter into any agreement for employment for any specified period or to make any agreement contrary to the foregoing.
- Lunderstand that all employees of Zelham, Inc., with respect to length of employment, are considered to be "at will." This means that I may terminate my employment with Zelham, Inc. at any time, without notice, without liability, for any extended period. Similarly, Zelham, Inc. may terminate my employment with Zelham, Inc. at any time without notice, without liability, for any extended period. There is no guaranteed length of employment for any employee. Similarly, any representation by any agent or employee of Zelham, Inc. to the contrary is not authorized or binding upon Zelham, Inc. unless in writing and signed by President or Vice President of Zelham, Inc.

I have read and reviewed the above certification statements and other information provided on the application.

Applicants Signature: ____

Date:

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