



Application for Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

(PLEASE PRINT)

Personal Information

Name (Last name first)			Are you 18 years or older? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address	City	State	Zip Code	
Telephone Number(s)			Social Security Number	

Desired Employment

Position(s)		Date You Can Start	
Are you employed now? <input type="checkbox"/> Yes <input type="checkbox"/> No	If so may we inquire of your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Desired Salary \$ _____ per _____	
Ever applied to this company before? <input type="checkbox"/> Yes <input type="checkbox"/> No	Where?	When?	
Ever worked for this company before? <input type="checkbox"/> Yes <input type="checkbox"/> No	Where?	When?	
Reason for leaving			
Name of last supervisor at this company			
Who referred you to Xpress Data?			
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Inquiry	
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other _____	

Are you currently eligible to work in the United States? Yes No

Education

School Level	Name and Location of School	Years Attended	Did You Graduate?	Subjects Studied
High School				
College				
Trade, Business or Correspondence School				

Former Employers

List below last three employers, starting with the most recent position.

Name of Present or Last Employer			
Address		City	State Zip Code
Starting Date	Leaving Date	Job Title	
May we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Name of Supervisor		Title	Phone
Description of Work			
Reason for Leaving			

Name of Previous Employer			
Address		City	State Zip Code
Starting Date	Leaving Date	Job Title	
May we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Name of Supervisor		Title	Phone
Description of Work			
Reason for Leaving			

Name of Previous Employer			
Address		City	State Zip Code
Starting Date	Leaving Date	Job Title	
May we contact your supervisor? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Name of Supervisor		Title	Phone
Description of Work			
Reason for Leaving			

References

Enter information for three people who are not relatives, whom you have known at least one year.

	Name	Address	Business	Years Acquainted
1				
2				
3				

Service Record

Branch of Service	Discharge Date Rank

Availability

Please let us know of any limitations in your work availability below.

Equal Employment Opportunity is Our Policy

In keeping with our commitment to the communities in which we do business, XDI is an equal employment opportunity employer. This means that employment decisions are based on merit and business needs, and not race, color, citizenship status, national origin, ancestry, gender, sexual orientation, age, religion, creed, physical or mental disability, physical handicap, medical condition, marital status, or veteran status. XDI complies with the law regarding reasonable accommodation for handicapped and disabled employees.

At-Will Employment

You are free to terminate your employment with XDI at any time, with or without reason, and XDI has the right to terminate your employment at any time, with or without reason. Although XDI may choose to terminate employment for cause, cause is not required. This is called "at-will" employment.

No one other than the President of XDI can enter into an agreement for employment for a specified period of time, or make any agreement or representations contrary to this policy. Further, any such agreement must be in writing, and signed by the President of XDI. XDI's policy of at-will employment may be changed only in writing signed by the President of XDI.

Apart from the policy of at-will employment and those policies required by law, XDI may change its policies or practices at any time without further notice.

Authorization

"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.

I authorize investigation of all statements contained herein and contacting the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damages that may result from utilization of such information.

I also understand and agree that no representative of the company is authorized to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by the President of XDI."

Signature

Date