



ADC, Inc. does not discriminate in hiring or employment on the basis of age, ancestry, color, creed, handicap, marital status, national origin, race, gender, sexual preference, or any other basis protected by state or federal law. Completion and acceptance of this application does not constitute a guarantee of employment. Please print in ink. You must complete the entire application.

APPLICATION INFORMATION

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ E-mail: _____

What type of employment are you seeking? Full-Time Part-Time Temporary Seasonal

If you are under 18 years of age, can you provide a work permit? Yes No

Have you ever worked for ADC, Inc.? Yes No

Are you legally authorized to work in the United States? Yes No

How were you referred to ADC, Inc.? _____

EDUCATION

School	School Name	City	State	No. of Years Attended	Did you Graduate?	Diploma or Degree	Area of Study
High School							
Technical School							
College/University							
Graduate School							
Other							

List any skills that are pertinent to the position you are applying for:

EMPLOYMENT HISTORY

Starting with your most recent employer, please provide your work history for the last 7 years.

May we contact these employers? Yes No Yes, but not current employer

Employer: _____ Address: _____
Job Title: _____ Phone Number: _____
Employed from: _____ to _____ Ending Salary: _____
Supervisor: _____ Reason for Leaving: _____
Job Duties/Responsibilities: _____

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Job Title: _____ Phone Number: _____
Employed from: _____ to _____ Ending Salary: _____
Supervisor: _____ Reason for Leaving: _____
Job Duties/Responsibilities: _____



REFERENCES

Please list the name and telephone number for three individuals not related to you, preferably past supervisors and/or coworkers who we can call for references.

Name: _____ Years Known: _____

Relationship to you: _____ Telephone Number: _____

Name: _____ Years Known: _____

Relationship to you: _____ Telephone Number: _____

Name: _____ Years Known: _____

Relationship to you: _____ Telephone Number: _____

PLEASE READ CAREFULLY BEFORE SIGNING THIS FORM

I certify that the information provided by me on this application is true and correct. I agree that ADC, Inc. shall not be held liable in any respect if my employment is terminated because of any misrepresentation, false statement, or omission by me in this application. I understand and agree that any misrepresentation, false statement, or omission by me in this application may render this application void, and if I am employed by ADC, Inc., may be reason for termination. If I am employed, I agree to comply with all company rules and regulations.

You are hereby authorized to verify the information I have supplied and to conduct any investigation of my personal history, credit and financial records, driving record(s), criminal convictions, and/or military service, employing consumer reporting agencies of your choice subject to the provisions of the Fair Credit Reporting Act (FCRA). I also understand that before I am denied employment based on information contained in the report, ADC, Inc., will provide me with a copy of the report and a description in writing of my rights under the FCRA. I understand that if I disagree with the accuracy of any of the information in the report, I must notify ADC, Inc., within 5 days of my receipt of the report. If I notify ADC, Inc., that I am challenging the information in the report, ADC, Inc., will not make a final decision on my status until after I have had a reasonable opportunity to address the information contained in the report.

I authorize investigation of all statements contained in this application, and authorize the companies, schools, and persons named above to give any information requested regarding my employment, character, and qualifications. I hereby release and hold harmless ADC, Inc., former employees, schools and persons from any liability or any damage arising out of or relating to release of information.

I understand and agree that if hired I will be employed on an at-will basis. This means that my employment relationship with the company may be terminated at any time by the company for any reason or no reason whatsoever within its sole discretion.

Signature: _____

Date: _____