

## EQUAL OPPORTUNITY EMPLOYER

It is our policy to abide by all federal, state and local laws prohibiting employment discrimination based solely on a person's race, color, religious creed, sex, national origin, ancestry, citizenship status, pregnancy, childbirth, physical disability, mental disability, age, military status or status as a Vietnam-era or special disabled veteran, marital status, registered domestic partner or civil union status, gender, medical condition, genetic information, sexual orientation, or any other protected status except where a reasonable, bona fide occupational qualification exists.  
Please print clearly in ink.

## PERSONAL INFORMATION

First Name	MI	Last Name	Today's Date
Current Mailing Address			
City		State	ZIP Code
Daytime Telephone	Home Telephone	Date Available for Work	Desired Compensation (optional)
Position for Which You Are Applying		Other Positions to Consider	
Employment Type (check all that apply) <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary		If Part-Time: Hours/Days Available	

## GENERAL INFORMATION

Are you subject to any agreement with a current or former employer (e.g. non-compete, confidentiality, non-disclosure) that would restrict your ability to work at Attic Breeze? If yes, please explain: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
Can you, after employment, submit verification of your legal right to work in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Can you perform the essential functions of the position, with or without reasonable accommodation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you at least the minimum legal age required for this position?	<input type="checkbox"/> Yes <input type="checkbox"/> No

## EDUCATION & TRAINING

	School Name	City and State	Degree / Diploma	Major / Course of Study	Received?
High School					<input type="checkbox"/> Yes <input type="checkbox"/> No
GED					<input type="checkbox"/> Yes <input type="checkbox"/> No
College					<input type="checkbox"/> Yes <input type="checkbox"/> No
Graduate School					<input type="checkbox"/> Yes <input type="checkbox"/> No
Trade School					<input type="checkbox"/> Yes <input type="checkbox"/> No

List any machines, equipment, or software programs you are qualified and experienced in operating
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Languages You Speak Fluently	Languages You Read/Write Fluently
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If driving is an essential job duty, do you possess a valid driver's license?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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## EMPLOYMENT HISTORY

List all work experience beginning with the present or most recent job. Use additional sheets if necessary.

### Position #1

Name of Employer		Type of Business		
Address		City	State	ZIP
Title	Telephone Number		Name & Title of Supervisor	
Type of Employment <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	From (mm/yyyy)	To (mm/yyyy)	Last Salary (\$)
Brief Description of Duties			Reason for Leaving	

### Position #2

Name of Employer		Type of Business		
Address		City	State	ZIP
Title	Telephone Number		Name & Title of Supervisor	
Type of Employment <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	From (mm/yyyy)	To (mm/yyyy)	Last Salary (\$)
Brief Description of Duties			Reason for Leaving	

### Position #3

Name of Employer		Type of Business		
Address		City	State	ZIP
Title	Telephone Number		Name & Title of Supervisor	
Type of Employment <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	From (mm/yyyy)	To (mm/yyyy)	Last Salary (\$)
Brief Description of Duties			Reason for Leaving	



## ACKNOWLEDGEMENT & SIGNATURE

Please read the following statements carefully. Sign and date below to acknowledge and agree.

### **Authorization to Verify Information.**

I authorize all persons listed on this application (and on the accompanying resume, if any) to give Attic Breeze any and all information concerning my previous employment, education, and any pertinent information they may have, personal or otherwise, and release all parties — including such persons and Attic Breeze — from liability for any damage that may result from furnishing this information.

### **At-Will Employment.**

If employed by Attic Breeze, I agree to abide by the policies and procedures of Attic Breeze. **Employment is at-will, meaning either the employee or the company may terminate employment at any time, with or without cause or notice, subject to applicable law.** I understand that no representative of the company, other than the CEO, has authority to change the terms of the at-will relationship, and any such change can occur only in a written employment contract.

### **Truthfulness of Information.**

I hereby affirm that the information provided on this application (and any accompanying resume) is true and complete to the best of my knowledge. I agree that falsification or significant omission of information requested in this application or in the application process may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

<input type="checkbox"/> <b>I have read, understood, and agree to the statements above.</b>
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Applicant's Signature   <hr/> <i>Sign above this line</i>	Print Full Name <hr/> Date Signed (mm/dd/yyyy) <hr/>
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