

EDUCATION

	Name and Location of School	Course of Study or Major	# of Years Completed	Diploma/Degree
Elementary				
High School				
College				
Graduate				
Vocational				

Please list any academic honors, scholarships, offices held, etc. (Do not list any which reflect your race, color, religion, gender, national origin, age, disabilities or veteran status.)

Describe any specialized training, apprenticeships, licenses or skills.

Have you received any job-related training in the United States Military? YES NO
Please give dates and explanation:

EMPLOYMENT HISTORY (Begin with current or most recent employer. Do not exclude any employment. Include any applicable temporary employment attach another sheet if necessary. Previous salaries or wages will not be used to determine compensation at SIRS.)

Company Name	Employment Dates From To	Salary Start End	Name and Title of Supervisor
Address		\$ \$	
Phone	Describe your duties:		
Reason for leaving and explanation			

Company Name	Employment Dates From To	Salary Start End	Name and Title of Supervisor
Address		\$ \$	
Phone	Describe your duties:		
Reason for leaving and explanation			

EMPLOYMENT HISTORY continued:

Company Name	Employment Dates From To	Salary Start End	Name and Title of Supervisor
Address		\$ \$	
Phone	Describe your duties:		
Reason for leaving and explanation			

Please provide any other information that you feel will help us in considering your application for employment.

REFERENCES (Please list three persons, who are not related to you or previous supervisors, who can provide professional references.)

Name	Address	Phone Number	Relationship/Occupation	Years Known

APPLICANT ACKNOWLEDGEMENT AND AUTHORIZATION

PLEASE READ CAREFULLY BEFORE SIGNING

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by Southern Indiana Resource Solutions, Inc. (hereinafter referred to as "SIRS") that such employment with SIRS is at will, for no specified duration and may be terminated by either SIRS or myself at any time, with or without cause or notice. I understand that none of the documents, policies, procedures, actions, statements of SIRS or its representatives used during the employment process is deemed a contract of employment real or implied. I understand that no representative of SIRS except the President has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the foregoing statements and that any such agreements must be made in writing and signed by the President of SIRS.

In consideration for employment with SIRS, if employed, I agree to conform to the rules, regulations, policies and procedures of SIRS at all times and understand that such obedience is a condition of employment. I understand that due to the nature of SIRS business, attendance and punctuality are considered essential requirements of every job at SIRS and that poor attendance or tardiness will result in disciplinary action.

I understand that if offered a position with SIRS, I may be required to submit to a pre-employment medical examination, drug screening and background check as a condition of employment. I understand that unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already employed. I understand that certain positions require annual checks be completed as a condition of continued employment. I understand that unsatisfactory results from these annual checks will result in termination of employment.

I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to SIRS and/or any of its representatives, agents or vendors and I release all parties involved from any and all liability for any and all damage that may result from providing such information.

I understand that this application is considered current for three months. If I wish to be considered for employment after this period I must fill out and submit a new application.

BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.

Signature _____

Date _____

Name and number of person completing this form if other than applicant: _____

SIRS IS PROUD TO BE AN EQUAL OPPORTUNITY EMPLOYER. ALL QUALIFIED APPLICANTS WILL RECEIVE CONSIDERATION WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, DISABILITY, VETERAN STATUS OR ANY OTHER STATUS PROTECTED BY LAW.

HR USE ONLY BELOW THIS LINE _____

Hired: _____ **Position:** _____

EEOC _____

NOTICE REGARDING BACKGROUND INVESTIGATION

A consumer report (background screening report) and/or an investigative consumer report which may include information concerning your character, employment history, general reputation, personal characteristics, police record, education, qualifications, motor vehicle record, mode of living, and/or credit and indebtedness may be obtained in connection with your application for and/or continued employment with Southern Indiana Resource Solutions (SIRS). **A consumer report and/or an investigative consumer report may be obtained at any time during the application process or during your employment with SIRS.** You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by Safe Hiring Solutions LLC, P.O. Box 295, Danville, IN 46122 888-215-8296.

AUTHORIZATION

By signing below, I, _____, hereby voluntarily authorize Southern Indiana Resources, Inc. (SIRS) to obtain either a consumer or an investigative consumer report about me from a consumer reporting agency and to consider this information when making decisions regarding my employment and/or continued employment at SIRS. I understand that I have rights under the Fair Credit Reporting Act, including rights discussed above. This report may be delivered in either written or electronic form.

Print Name (last, first, middle)

Social Security Number

Date of Birth (MM/DD/YYYY)
(For ID Purposes Only)

Drivers License Number

Drivers License State

Any other names I have been known by: _____

Current Address: _____

Previous Addresses (Last 3 Years) _____

Signature

Date

Check for CA, MN or OK applicants only, if you would like to receive a copy of the consumer report if one is obtained.

**VOLUNTARY SELF-IDENTIFICATION
(CONFIDENTIAL-FOR STATISTICAL USE ONLY)**

We are an equal opportunity employer and do not discriminate on the basis of race, color, religion, sex, age, national origin, disability, veteran status, sexual orientation or any other classification protected by federal, state or local law. The information below will be used only in the compilation of data for affirmative action reporting.

Completion of this data is voluntary and will not affect your opportunity for employment or terms or conditions of employment, if hired. Identification can be declared at any time prior to or, if applicable, after hire. Please return this page with your application.

PLEASE COMPLETE IN FULL:

Date: _____ Position applied for: _____

Name: _____

Social Security # _____

Sex: (Circle appropriate response) Male Female

Date of birth: _____

Applicant's zip code: _____

RACE/ETHNICITY:

(Please check one of the descriptions below corresponding to the ethnic group with which you most identify.)

___ **Hispanic or Latino** – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

___ **White (Not Hispanic or Latino)** – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

___ **Black or African American (Not Hispanic or Latino)** – A person having origins in any of the black racial groups of Africa.

___ **Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)** – A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

___ **Asian (Not Hispanic or Latino)** – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

___ **American Indian or Alaska Native (Not Hispanic or Latino)** – A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

___ **Two or More Races (Not Hispanic or Latino)** – All persons who identify with more than one of the above five races.

___ **Race missing or unknown** - Applies to **Applicants only**, where a resume or application that is screened is received without any racial or ethnic identification and no further contact is made with the applicant.

VETERAN STATUS:

(Please check one if it describes your veteran status.*)

_____ **SPECIAL DISABLED VETERAN:** Means (A) a veteran who is entitled to compensation (or who, but for the receipt of military retired pay, would be entitled to compensation) under laws administered by the Department of Veteran Affairs for a disability rated at 10 or 20 percent in the case of a veteran who has been determined to have a serious employment disability or (B) a person who was discharged or released from active duty because of a service-connected disability.

_____ **VIETNAM ERA VETERAN:** A Vietnam Era veteran is a person who (1) served on active duty for a period of more than 180 days, any part of which occurred between August 5, 1964, and May 7, 1975, and was discharged or released with other than a dishonorable discharge; (2) was discharged or released from active duty for a service connected disability if any part of such active duty was performed between August 5, 1964, and May 7, 1975; or (3) served on active duty for more than 180 days and served in the Republic of Vietnam between February 28, 1961, and May 7, 1975.

* Veteran status may only be requested after a job offer is made.

Personal and Confidential

This page contains sensitive information, store in secure "Affirmative Action Forms" files, separately from personnel records!