

Broadband Solutions, Inc.

1886 Commerce Drive
 De Pere, WI 54115
 Phone: (920) 339-8056
 Fax: (920) 339-8058



EMPLOYMENT APPLICATION

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin or other protected classification.

Applicant Information

Full Name: _____ **Date:** ____/____/____
Last First M.I.

Address: _____ **WI**
Street Address Apt # City State ZIP Code

Phone Number: (____) _____ - _____ **Email:** _____

Other Number: (____) _____ - _____ **Social Security Number:** _____ - _____

Position Applied For: _____ **Referred By:** _____

When can you start: ____/____/____

Wage / Salary Desired: \$ _____

Please check the times you are available for work.

Hours Available	Sun	Mon	Tue	Wed	Thur	Fri	Sat
Day: 7am to 5pm							
Night: 5pm to 10pm							

Are you at least 18 years old?.....	<input type="checkbox"/>	<input type="checkbox"/>	Have you worked for this company before?.....	<input type="checkbox"/>	<input type="checkbox"/>
If not, can you furnish a work permit?.....	<input type="checkbox"/>	<input type="checkbox"/>	If yes, When? _____		
Are you willing to work overtime?.....	<input type="checkbox"/>	<input type="checkbox"/>	Are you able to perform the essential functions of the job with or without reasonable accommodations?	<input type="checkbox"/>	<input type="checkbox"/>
Are you willing to travel?.....	<input type="checkbox"/>	<input type="checkbox"/>	How did you learn of this opening? _____		
Are you legally eligible to work in this country?.....	<input type="checkbox"/>	<input type="checkbox"/>			
Have you ever been convicted of a felony?.....	<input type="checkbox"/>	<input type="checkbox"/>			

If yes, describe conditions: _____

Conviction will **NOT** necessarily disqualify an applicant for employment. I also understand that a criminal background check will be done prior to my first day of employment. If any information I have given concerning conviction of a felony is false, I will not be considered for employment.

Answer the following questions if you are applying for a position the requires you to drive a company vehicle.

Do you have a valid driver's license? YES NO Drivers License #: _____

State of License: _____ Expiration Date: ____/____/____

In the past 36 months (3 years) have you had any type of Traffic Accident? Or received any traffic violations?
 If yes, please explain: _____

If hired, I further understand my driving record will be periodically checked as may be necessary and my continued employment will be contingent upon maintaining an acceptable driving record. I will notify my supervisor of any moving violations as they occur. If information I have given concerning my driving record proved to be false, (other than an inability to remember exact date of violations), I will not be considered for employment.

Education

Name / Location of High School: _____ **Diploma / Degree:** _____

Date of Attendance From: _____ To: _____ Did You Graduate? YES NO
 Name / Location of **College**:..... Diploma / Degree: _____
 Date of Attendance From: _____ To: _____ Did You Graduate? YES NO
 Name / Location of **Other**:..... Diploma / Degree: _____
 Date of Attendance From: _____ To: _____ Did You Graduate? YES NO

In addition to your work history, what other experiences, training, skills, licenses or qualifications would especially fit you for work with Broadband Solutions, Inc. Please detail below:

Work History - Starting with most recent

Please print all information

Company _____ Address _____
 () - _____ May we contact them for a reference?
 Phone _____ Supervisors Name & Title _____ YES NO
 \$ _____ \$ _____
 Start Date _____ Starting Salary _____ Ending Date _____ Ending Salary _____
 Current / Ending Job Title _____ Reason for Leaving? - If still employed, reason for desire to leave. _____

Responsibilities: _____
 List the jobs you held, duties performed, skills used or learned. List any advancements while you were employed here.

Please print all information

Company _____ Address _____
 () - _____ May we contact them for a reference?
 Phone _____ Supervisors Name & Title _____ YES NO
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Responsibilities: _____
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I certify that the facts set forth in this Employment Application are true & complete to the best of my knowledge. I understand that if I am employed, false statements may result in dismissal. I authorize the Company to make any investigation of any of the facts set forth in this application. By my signature below, I authorize Broadband Solutions, Inc. to perform any background check, DMV check & past employment verification. I also authorize the companies, schools, & persons named above to give any information requested regarding my employment & qualifications. I release & hold harmless Broadband Solutions, Inc. & said companies, schools & persons from any liability.

I understand that employment at this Company is "at will", which means that either I or the Company can terminate the employment relationship at any time, with or without prior notice and for any reason not prohibited by statute. All employment is continued on that basis. I understand that no supervisor, manager or executive of the Company, other than the president has any authority to alter the foregoing.

Applicant's Signature _____ Date _____