



It is the practice of Diverse Power, Inc. to accept Applications for Employment for existing vacancies only. You must submit a separate application for each position for which you desire to be considered. Complete information should be furnished in order that we may give you fair and appropriate consideration. As an Equal Opportunity Employer, it is the policy of Diverse Power, Inc. to afford equal employment opportunity to all individuals, regardless of race, color, religion, sex, national origin, handicap, disability, veteran status or age.

**EMPLOYMENT APPLICATION**

**PERSONAL INFORMATION**

Please Print *(Incomplete information could disqualify you from further consideration)*

Name \_\_\_\_\_ *(Should match Social Security Card)*  
 Last First Middle

Address \_\_\_\_\_  
 Number Street Apartment Number

Address \_\_\_\_\_  
 City State Zip Code

Primary Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Are you 18 years of age or older? Yes No If no, can you furnish proof of age? \_\_\_\_\_

Job(s) Applying For \_\_\_\_\_

Date Available \_\_\_\_\_ Wage Expected \_\_\_\_\_ per \_\_\_\_\_

Only U.S. Citizens or Aliens who have a legal right to work in the U.S. are eligible for employment. Can you, upon employment, provide genuine documentation establishing your identity and eligibility to be legally employed in the United States? Yes No

Can you work any shift? Yes No Can you work overtime, including weekends? Yes No

Can you perform the essential functions of the position with or without reasonable accommodation for which you are applying? Yes No

If no, please explain (If you have any questions as to what functions are applicable to the position for which you are applying, please ask the interviewer before you answer this question).

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? Yes No

If yes, explain:

How did you hear about us?  Walk In  Advertisement  Referral-Who? \_\_\_\_\_  
 Website Other \_\_\_\_\_

Have you ever worked for this company before?  Yes  No (If yes, please complete the next two lines)

Dates of Employment \_\_\_\_\_ - \_\_\_\_\_ Department/Project \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

**An Equal Opportunity Employer**



Please list any friends and/or relatives working for Diverse Power, Inc. and their relationship to you.

|            |                    |
|------------|--------------------|
| Name _____ | Relationship _____ |
| Name _____ | Relationship _____ |
| Name _____ | Relationship _____ |
| Name _____ | Relationship _____ |
| Name _____ | Relationship _____ |

**REFERENCES**

Give the names of three professional references, which you have known at least three (3) years.

|   | Name | Address, Phone, Email | Company | Years Acquainted |
|---|------|-----------------------|---------|------------------|
| 1 |      |                       |         |                  |
| 2 |      |                       |         |                  |
| 3 |      |                       |         |                  |

**EDUCATION**

| Type of School | Name of Institution City/State | Dates Attended |  | Graduated?<br>Yes/No         | Date of Graduation | Degree or Diploma | Major |
|----------------|--------------------------------|----------------|--|------------------------------|--------------------|-------------------|-------|
| High School    |                                | Fr             |  | <input type="checkbox"/> Yes |                    |                   |       |
|                |                                | To             |  | <input type="checkbox"/> No  |                    |                   |       |
| College        |                                | Fr             |  | <input type="checkbox"/> Yes |                    |                   |       |
|                |                                | To             |  | <input type="checkbox"/> No  |                    |                   |       |
| Other          |                                | Fr             |  | <input type="checkbox"/> Yes |                    |                   |       |
|                |                                | To             |  | <input type="checkbox"/> No  |                    |                   |       |



**EMPLOYMENT HISTORY**

Include your last three (3) employers, including periods of unemployment, starting with the most recent and working backwards in time. *(Incomplete information could disqualify you from further consideration)*

|                                |     |                                |           |
|--------------------------------|-----|--------------------------------|-----------|
| From                           | To  | Employer Name                  | Telephone |
| Job Title                      |     | Address                        |           |
| Immediate supervisor and title |     | Summarize job responsibilities |           |
| Ending Salary                  |     | Reason for leaving             |           |
| \$                             | Per |                                |           |
| From                           | To  | Employer Name                  | Telephone |
| Job Title                      |     | Address                        |           |
| Immediate supervisor and title |     | Summarize job responsibilities |           |
| Ending Salary                  |     | Reason for leaving             |           |
| \$                             | Per |                                |           |
| From                           | To  | Employer Name                  | Telephone |
| Job Title                      |     | Address                        |           |
| Immediate supervisor and title |     | Summarize job responsibilities |           |
| Ending Salary                  |     | Reason for leaving             |           |
| \$                             | Per |                                |           |



APPLICANT STATEMENT

Please Read Carefully Before Signing

Information Accuracy

By signing below, I certify that the answers and information, whether set out above, attached to this Employment Application, or provided to Diverse Power, Inc. as a part of my application process, are true, accurate and complete to the best of my knowledge. I understand that if any such information is not true, accurate and complete, I may be disqualified from further consideration for employment, or, if discovered at a later date, dismissed from employment. I authorize Diverse Power, Inc. to investigate all statements contained in this application for employment, and to investigate my character and qualifications. I authorize my prior employers, references, and others with information regarding my work, educational history, or my character, to provide Diverse Power, Inc. all requested information and reference, and to cooperate fully with the investigation of my character and qualifications. I further release all the sources referenced (and all their employees, officers, directors and agents, and Diverse Power, Inc. and its employees, officers, directors and agents) of all the claims and liability for any damage resulting from their furnishing any information, whether I agree or disagree with the content of the disclosed information. Thus, I understand that if any of the reference sources discloses information which I believe to be erroneous, I cannot bring any legal action against that source or Diverse Power, Inc. regarding the disclosure of the information.

Background Check

In consideration for employment, Diverse Power, Inc. may obtain a background check, including a report from the Department of Motor Vehicles (if applying for a position involving driving during work hours), and/or background reports, which may include any criminal conviction records from any federal, state or local law enforcement agency or court, as a part of the process of considering my candidacy. In the event that information from the report is utilized in whole, or in part, in making an adverse decision with regard to my potential employment, before making the adverse decision Diverse Power, Inc. will provide me with a copy of the report. I further release Diverse Power, Inc. (and all their employees, officers, directors and agents) and any law enforcement agency from any and all liability for any damages resulting from furnishing any criminal conviction information, whether I agree or disagree with the contents of the information.

Pre-employment Physical and Drug Test

I understand that passing a physical examination by a physician selected by Diverse Power, Inc. is required to determine physical fitness as related to the job requirements before being employed by Diverse Power, Inc. The physician is hereby authorized to discuss the results of the physical examination, as it relates to work activities, with the appropriate Diverse Power, Inc. personnel. I understand that my employment is conditional also upon the results of a urine drug screen for which I agree to submit a specimen for testing. I realize that any positive result not caused by the presence of a legitimately prescribed prescription drug will cause my application to be refused for employment or dismissed if the results of the test are received after my initial employment date.

Employment At-Will

I understand that this application is not a contract of employment. I also acknowledge that no oral representations have been made, that no one within Diverse Power, Inc. has the authority to make oral contracts whatsoever. I understand that if Diverse Power, Inc. makes an offer of employment, my employment is terminable at-will, with or without cause, by either myself or Diverse Power, Inc. at any time.

Policy Compliance

I understand that Diverse Power, Inc.'s Drug-Free Workplace Policy (you may request a copy of this policy if you wish) applies to all applicants and employees, if I am employed. If I am employed by Diverse Power, Inc., and in return for such employment, I agree to comply with all policies and procedures of Diverse Power, Inc., including the rules and regulations set forth in any handbook, manual, policy or any other communication. I also agree to submit to any lawful drug, or integrity testing that may be required as a condition of employment, and understand that refusal to submit to such testing during the course of my employment may result in disciplinary action, up to and including discharge. I understand that any offer of employment would be contingent on my ability to produce documentation required by law to verify my identity and either U.S. citizen status or authorization to work in the U.S. Nothing herein creates a promise of employment, nor does it change the at-will nature of my employment if I am employed.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_