

Application for Employment

B.A. Property Management Services, LLC is an Equal Opportunity Employer.

B.A. Property Management Services, LLC does not discriminate on the basis of age (as defined by applicable law), religion, sex, race, color, sexual orientation, national origin, disability, or veteran status. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Please notify the human resources department if you need an accommodation for:

• Completing an application

• Job interview

• Testing

• Job demonstration.

Each question should be fully and accurately answered. No action can be taken on this application until all questions have been answered. Use blank paper if you need more room to write.

PLEASE PRINT except for signature on this application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information

Last Name _____	First Name _____	M.I. _____
Street Address _____		
City _____	State _____	Zip Code _____
Home Phone Number _____	Office Phone Number _____	
Where can a message be left? Phone Number _____		

Position Objective

Position applying for _____ Full-time Part-time Temporary

Location _____ Date available to start _____ Salary range desired _____

Personal Information

If hired, can you furnish proof you are eligible to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever worked for [Company Name]? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, when _____ Title/ location _____
Have you ever applied at [Company Name]? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, when _____ For what position? _____
Do you have any relatives or friends currently employed at [Company Name]? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please provide name(s) and relationship(s). _____
Are you available to work overtime? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you available for shift work? <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you available to be on call 24 hours/seven days a week if required by job? <input type="checkbox"/> Yes <input type="checkbox"/> No

Have you ever been convicted of a violation of the law (except a minor traffic violation or sealed record)? Yes No

(A yes does not automatically disqualify you from employment since the nature of the offense, date, and the job for which you are applying will also be considered.)

If yes, give details. _____

Referred by: Newspaper Employee Agency WWW Other

Please specify referral source. _____

Education and Training

Name of high school _____ Number of years completed _____ Diploma: Yes No

College/Undergraduate school _____ Number of years completed _____ Diploma: Yes No

City/State _____

Year diploma awarded _____ Type of degree/Area of study _____ Dates attended _____

Graduate school _____ Number of years completed _____ Diploma: Yes No

City/State _____

Year diploma awarded _____ Type of degree/Area of study _____ Dates attended _____

Additional training, education, or certificates that are related to the position for which you are applying: _____

List additional skills that are related to the position for which you are applying:

Computer skills (such as competence with software packages) _____

Clerical skills (such as typing) _____

Employment History

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time, including military service and any periods of unemployment. If self-employed, give firm name and supply business references.

Employer _____
Address _____
City _____ State _____ Zip Code _____
Dates of employment From _____ To _____
Name, title, and phone number of manager _____
Your job title _____
Responsibilities _____
Reason for leaving _____
May we contact your present employer at this time? <input type="checkbox"/> Yes <input type="checkbox"/> No If not now, specify when _____

Employer _____
Address _____
City _____ State _____ Zip Code _____
Dates of employment From _____ To _____
Name, title, and phone number of manager _____
Your job title _____
Responsibilities _____
Reason for leaving _____
May we contact your present employer at this time? <input type="checkbox"/> Yes <input type="checkbox"/> No If not now, specify when _____

Employer _____
Address _____
City _____ State _____ Zip Code _____
Dates of employment From _____ To _____
Name, title, and phone number of manager _____
Your job title _____
Responsibilities _____
Reason for leaving _____

May we contact your present employer at this time? Yes No If not now, specify when _____

Affidavit, Consent, and Release
Please Read Carefully Before Signing This Application

- I certify that the information contained in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.
- I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.
- I understand I will be required to successfully pass a drug screening examination and a criminal background check. I hereby consent to a pre-employment drug screen and a background check as a condition of employment, if required.
- I understand that this application, verbal statements by management, or subsequent employment does not create an express or implied contract of employment nor guarantee employment for any definite period of time. Only the chief executive officer and the president of [Company Name] have the authority to enter into an agreement of employment for any specified period and such agreement must be in writing, signed by chief executive officer or the president and the employee. If employed, I understand that I have been hired at the will of the employer and my employment may be terminated at any time, with or without reason and with or without notice.

I have read, understand, and by my signature consent to these statements.

Signature _____ Date _____