## AQUAWORX INC.

## **EMPLOYMENT APPLICATION**

			_
			- 1

Position Applying For:				
Last Name	F	Middle Initial		
Street and Number			{Apt No.}	
City and State		Zip Code	Telephone Number	
In Case of EMERGENCY ca	ll:			
Name	Address		Telephone Number	
How did you learn about this	s position? Newspape	r Friend Current En	nployee Other	
		al Dagistustian		
List any required License, Cert	tification, or Professior	iai Registration:		
List any required License, Cert  License	state State	Number	Exp. Date	
List any required License, Cert  License  You must respond to the follo	State		Exp. Date	

	le accommod	ation to perforn		dation for disabled the position for wh		•	•	
Please list all	Please list all formal education:							
Name of School		How Many Years Attended		Major Subject or Course of Study		List Degree or Certificate Received		
these also. In	k record for the clude self-empedditional shee	oloyment. If u	nemployed for	orior to 10 years ago r a period of time, s be attached to subst	tate "unemp	oloyed" and red	cord time	
From (Mo & Yr)	Title of your position		Employers Name			Phone		
To (Mo & Yr)	D.:		Number and Street		City & State		7:	
10 (MO & 11)	Duties		Number and Street Cit		City & State		Zip	
Starting Salary	1		Name and Title of Supervisor					
Ending Salary			Reason for Leavi	ng				
From (Mo & Yr)	Title of your position		Employers Name			Phone		
To (Mo & Yr)	Duties		Number and Street		City & State		Zip	
Starting Salary			Name and Title o	f Supervisor				
Ending Salary			Reason for Leavi	ng				

	History (con't) Title of your position	Employers Name		Phone	
Го (Мо & Yr)	Duties	Number and Street	City & Sta	te	Zip
Starting Salary		Name and Title of Supervisor			
,					
Ending Salary		Reason for Leaving			
From (Mo & Yr)	Title of your position	Employers Name	Employers Name		
Го (Мо & Yr)	Duties	Number and Street	City & Sta	te	Zip
Starting Salary	_	Name and Title of Supervisor			
Ending Salary		Reason for Leaving			
References:	N				
	Name	Address		Phone Number	
I understand the 90 day proadversely effermental reservathis application	that Aquaworx is a drug frobation. I hereby certify the ect my chances for employation whatsoever. I further on. I understand that any od to secure employment secure.	PLICANT'S CERTIFICATION The work place that I will have that I have not, knowingly, with the work, and the answers given be certify that I, the undersigned period of mission or misstatement of many hall be grounds for rejection of	to submit to a dranheld any inform by me are true and applicant, have aterial fact on th	ug test before ation that mig d correct with personally cost application	ght nout any ompleted or any
discharge if I a thoroughly invemployment a employment r disclosure. In employees and in any way rel 90-day probat Company afte	vestigate my references, vand, further, authorize my records, including disciplinaddition, I hereby released agents, and all other perlated to such an investigation period before being c	of the time elapsed before disc work record, education, and oth former employers to disclose to mary reports and letters of repri- te the company, my former emp- ersons from any and all claims, of the considered for a permanent emp- ty still wish to be considered for ion.	over. I hereby a ter matters related to the Company imand, without goloyers, their residemands, and lial that in the event bloyment. If you	uthorize the od to my suita any and all of giving me not bective direct bilities arisin t that I am his have not hear	company to bility for my ice of such ors, officers out of, or red I have and from the