

APPLICATION FOR EMPLOYMENT

Applicant Information

Today's Date: _____

LAST NAME / FIRST NAME		MIDDLE NAME	EMAIL ADDRESS	
CURRENT ADDRESS		CITY	STATE	ZIP CODE
PRIOR ADDRESS IF LIVED ABOVE LESS THAN 2 YEARS		CITY	STATE	ZIP CODE
DAYTIME PHONE:	EVENING PHONE:		REFERRED BY	
U.S. OR OTHER MILITARY SERVICE			STATUS	
YES <input type="checkbox"/> NO <input type="checkbox"/>				
HAVE YOU BEEN CONVICTED OF A FELONY WITHIN THE LAST 5 YEARS? IF YES, PLEASE GIVE DATE AND EXPLAIN:		YES <input type="checkbox"/> NO <input type="checkbox"/>	CITY AND STATE (OR COUNTRY) OF BIRTH	
<i>A conviction does not necessarily disqualify you from employment (attach separate sheet if needed)</i>				

Employment Desired

POSITION		DATE YOU CAN START	DESIRED SALARY
ARE YOU EMPLOYED NOW? YES <input type="checkbox"/> NO <input type="checkbox"/>	IF SO, MAY WE INQUIRE W/ YOUR PRESENT EMPLOYER?	YES <input type="checkbox"/> NO <input type="checkbox"/>	ARE YOU ELIGIBLE TO WORK IN THE UNITED STATES? (you will be required to provide proof of authorization to work in the US if hired)
HAVE YOU APPLIED TO OR WORKED FOR THIS COMPANY BEFORE? (specify which)		APPLIED AT (LOCATION): _____ WORKED AT (LOCATION): _____	DATE APPLIED: _____ DATES EMPLOYED: (from / to)

Education History

	NAME AND CITY/STATE/COUNTRY OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE?	COURSE OF STUDY / DEGREE
HIGH SCHOOL				
COLLEGE				
OTHER				

General Information

COMPUTER PROFICIENCY OR OTHER SKILLS	CHECK BOX IF BILINGUAL AND LIST FLUENT LANGUAGES
LICENSES OR CERTIFICATIONS	<input type="checkbox"/>

*We are pleased that you are seeking employment with LMP, Inc.
 Applicants are considered without regard to race, color, religion, sex, age, disability, citizenship or national origin,
 or any factors prohibited by local, state, or Federal law.*

Employment History

(LIST LAST FOUR EMPLOYERS, WITH MOST RECENT LISTED FIRST)

MONTH AND YEAR	NAME & ADDRESS/CITY/STATE OF EMPLOYER	POSITION	SALARY	REASON FOR LEAVING
FROM				
TO				
FROM				
TO				
FROM				
TO				
FROM				
TO				

References

(LIST 3 PROFESSIONAL REFERENCES - NON-RELATIVES - WHO CAN EVALUATE YOUR PREVIOUS EMPLOYMENT PERFORMANCE)

	NAME	COMPANY	TITLE	PHONE NUMBER
1				
2				
3				

Certification and Release

I hereby authorize LMP, Inc. ("the Company") to thoroughly investigate my references, work record, education, and other matters related to my suitability for employment and, further, I authorize the references I have listed to disclose to the Company all data, reports, and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and other persons, corporations, partnerships, and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure.

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment may result in rejection of this application or in immediate discharge if I am employed, regardless of the time elapsed before discovery.

I understand that nothing contained in this application, or conveyed during any interview which may be granted, or during my employment, if hired, is intended to create an employment contract between the Company and me. In addition, I understand and agree that if I am employed, my employment is at-will and is for no definite or determinable period and may be terminated at any time, with or without prior notice, and with or without cause, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the Company unless made in writing and signed by me and the Company's designated representative.

I understand that in connection with my application for employment, the Company may obtain a consumer report and/or investigate consumer reports about me that may contain information as to my character, general reputation, personal characteristics, and mode of living. Such reports may include or consist of my driving history, criminal history, or credit history. I further understand that any job offer extended by the Company is contingent upon receipt of a favorable consumer or investigative consumer report about me.

I understand that in connection with my application for employment, depending upon the position for which I have applied, any offer of employment is conditioned upon my taking and passing a post-offer/pre-employment drug test, and if required for the position for which I have applied, a post-offer/pre-employment medical examination. I understand that I may refuse to take any required pre-employment drug test and/or medical examination, but that if I do, any offer of employment will be immediately withdrawn.

I HAVE READ THE ABOVE PARAGRAPHS, UNDERSTAND THEIR IMPORTANCE AND EFFECT UPON MY EMPLOYMENT, AND ACCEPT SAME AS CONDITIONS OF EMPLOYMENT WITH THE COMPANY.

This application, when completed and signed, becomes the property of LMP, Inc.

APPLICANT SIGNATURE:			
PRINTED NAME:		DATE:	