



## ***EMPLOYMENT APPLICATION***

**TO THE APPLICANT:** WE APPRECIATE YOUR INTEREST IN **Alpine Innovations LLC**. IT IS THE POLICY OF **Alpine Innovations LLC** TO SELECT AND PROMOTE WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, DISABILITY, OR OTHER UNLAWFUL CLASSIFICATION.

### ***PERSONAL INFORMATION***

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (Apt #)

(City) (State) (Zip Code)

SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

Email \_\_\_\_\_

Position applied for \_\_\_\_\_

Full-Time Part-Time (Circle One)

Days/Times of Availability \_\_\_\_\_

Referral source (please specify) newspaper ad  Placement office \_\_\_\_\_  
 employment office  other \_\_\_\_\_

Have you ever WORKED FOR **Alpine Innovations LLC** before? Yes / No please provide dates \_\_\_\_\_

Are you a U. S. Citizen? Yes No (Circle One)

Alien Registration # \_\_\_\_\_

Are you over age 18? Yes No (Circle One)

Name and Number of person to contact in case of an Emergency:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Telephone \_\_\_\_\_

Have you ever been convicted of a felony crime? No Yes (Circle One)  
 Have you ever been convicted of a misdemeanor crime? No Yes (describe below)

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*Conviction is*

*not an automatic disqualification for a job; the type and seriousness of the crime, the frequency of violations, the age at the time of conviction, the date of conviction, population of requested employment and the entire work and educational history will be considered. Additional or supportive documentation may be requested to assist in rendering an employment decision.*

**EDUCATION**

Highest grade completed (Circle One) 1 2 3 5 6 7 8 9 10 11 12 13 14 15 16  
 17 18 19+

Do you have a high school diploma or GED? Yes No (Circle One)

	SCHOOL	CITY/STATE	DEGREE	FIELD	YEAR
HIGH SCHOOL					
COLLEGE					
COLLEGE					
BUSINESS/VOCATIONAL					

Additional skills or qualifications

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Do you hold a professional license or certification relevant to the job for which you are applying?

No Yes (Circle One) If yes, please name \_\_\_\_\_

**PROFESSIONAL AND CHARACTER REFERENCES** (Not relatives)

Name Title Address Phone


List any other name by which these references might know you: \_\_\_\_\_

## ***WORK HISTORY***

Begin with most recent employer. If additional space is needed, attach extra sheet.

<b>EMPLOYER</b>	<b>DATES</b>		<b>SALARY</b>	<b>POSITION</b>	<b>REASON LEFT</b>	<b>SUPERVISOR NAME</b>
	<b>FROM</b>	<b>TO</b>				
ADDRESS PHONE #						
ADDRESS PHONE #						
ADDRESS PHONE #						
ADDRESS PHONE #						
ADDRESS PHONE #						
ADDRESS PHONE #						
ADDRESS PHONE#						
ADDRESS PHONE#						

May we contact your present employer? \_\_\_\_\_ Previous employers? \_\_\_\_\_ If not, explain which ones may not be contacted and reason(s)

\_\_\_\_\_

\_\_\_\_\_

Name \_\_\_\_\_

SS# \_\_\_\_\_

I understand that any offer of employment *may* be contingent upon the successful completion of a urine drug screen, criminal background check, a motor vehicle driving record check, child or adult protective services check and/or professional license verification, should such be deemed necessary for the position for which I am applying. I also understand that if hired I will be required to produce documentation verifying my U.S. citizenship or work permit within 3 days of hire.

I hereby give Alpine Innovations LLC or its authorized representatives permission to make a thorough investigation of my past employment, education, and activities, and I release from liability all persons, companies, corporations, governmental entities, or academic institutions supplying such information. I also release Alpine Innovations LLC and its authorized representatives from any liability arising from making such investigation. I understand that falsified statements or misrepresentations or omissions on this application, other employment documents shall be considered sufficient cause for denial of employment or discharge.

If employed, I will follow the policies of Alpine Innovations LLC and understand that my employment and compensation can be terminated with or without cause, or with or without notice, at any time, at my option or at the option of the Company.

Additionally, I understand that nothing contained in this application or in the granting of an interview is intended to create an employment contract between Alpine Innovations LLC and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me and I understand that no such promise or guarantee is binding upon Alpine Innovations LLC unless made in writing by the Owner. If an employment relationship is established, I acknowledge that no consideration has been furnished to Alpine Innovations LLC for my employment other than my services.

**I ALSO UNDERSTAND THAT IF AN EMPLOYMENT RELATIONSHIP IS ESTABLISHED, I WILL BE AN EMPLOYEE AT WILL, WHICH MEANS THAT MY EMPLOYMENT IS FOR NO DEFINITE PERIOD; EITHER I OR ALPINE INNOVATIONS LLC CAN TERMINATE MY EMPLOYMENT AT ANY TIME WITHOUT PRIOR NOTICE AND THE TERMS AND CONDITIONS OF MY EMPLOYMENT CAN BE CHANGED BY ALPINE INNOVATIONS LLC AT ANY TIME.**

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_