

Employment Application



PERSONAL DATA (Please print and complete all sections. If you need additional space, please attach an additional sheet.)

Name _____ Date _____
Last First Middle

Present Address _____
Street City State Zip

Contact _____
Home Phone Number Other Phone Number Email Address

Emergency Contact _____
Name Phone Number

SS # _____ Are you authorized to work in the United States?* Yes No

Have you ever applied to Channel Source Direct before? Yes No

Can you perform the function of the job you are applying with or without accommodation? Yes No

List any relative(s) employed by us _____

Have you even been convicted of a crime? Yes No If "Yes", please explain _____

**Federal law prohibits the employment of unauthorized aliens. All person hired must submit satisfactory proof of employment authorization and identity within three (3) days of being hired. Failure to submit such proof within the required time shall result in immediate employment separation.*

EMPLOYMENT DESIRED

Position(s) you wish to be considered for _____

Lowest pay you will accept \$ _____ hr / annual Date you can start _____

AVAILABILITY* Full-time Part-time – # of hours per week _____ Temporary Seasonal

	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	ALL DAYS
MORNING								
AFTERNOON								
EVENING								
NIGHT								

**Attempts will be made to accommodate your desired work schedule.*

EDUCATION

Name & Address		Major/Degree Graduate?	Name & Address		Major/Degree Graduate?
High School		Yes or No	Graduate School		Yes or No
Business or Technical		Yes or No	US Military Education		Yes or No
College or University		Yes or No	Other		Yes or No

Subjects of special study or research _____

Honors Received _____

Computer skills/programs proficient in using _____

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PREVIOUS EMPLOYMENT (Give complete employment records beginning with last / present employer first.)

Name of Employer	Position Held	From month / year	To month / year	Immediate Supervisor / Manager	Reason for Leaving	Salary
		/	/	Name: Tel:		
		/	/	Name: Tel:		
		/	/	Name: Tel:		

May we contact any of your listed or former employers for reference purposes at this time? Yes No
 Other than English, what languages do you speak (S), read (R) &/or write (w) _____

PROFESSIONAL REFERENCES (Provide the names of three persons, not related to you, whom you have known at least one year.)

Name	Address	Telephone(s)	Relationship	Years Acquainted

How did you hear about us? Publication* Education* Agency* Other*
 CSD Associate* *Provide specific source/name _____

ACKNOWLEDGEMENTS

In connection with my application for employment and as a condition of continuing employment, Channel Source Direct, Inc. ("CSD"), has my permission to contact / investigate all references, schools, former employers, criminal convictions, motor vehicle and other reports. These reports will include information as to my character, work habits, performance, education, compensation, and experience along with reason for termination of employment from previous employers. Furthermore, I understand that the company may be requesting information from various federal, state, and other agencies which maintain records concerning my past activities relating to my driving, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies. I authorize without reservation, any party or agency contacted to furnish the above mentioned information and relates all parties involved from liability and responsibility for doing so. I here consent to obtaining the above information by CSD and/or any of their agents. This authorization and consent shall be valid in original, fax, or copy form. I acknowledge the answers to questions and the information in this application and any referenced attachments are true and accurate to the best of my knowledge and belief.

If employed by Channel Source Direct:

- I will observe all CSD's policies and guidelines.
- I understand that neither an offer of employment nor employment itself, nor any of CSD's policies or procedures, carry any guarantee of employment for any length of time, and that my employment, compensation, and benefits are at will and can be terminated, with or without cause or notice at any time, at the option of CSD or myself. Such terms are not subject to modification except by written agreement entered into and signed by the President of CSD.
- I understand that misrepresentation, falsification or omission of information for employment by CSD, may result in revoking any offer of employment, or in the event that I am employed, may result in termination of my employment for cause.

Signature _____ Date _____

CSD is an equal opportunity employer. We are dedicated to a policy of non-discrimination of employment on any basis including race, creed, color, age, sex, religion, national origin, disability, marital status, sexual orientation, citizenship or veteran status.