

Employment Application



Only fully completed applications will be considered

Personal Data (Print or Type)

Name	Last	First	Middle Name			
	Street Address			Home Telephone (Include Area Code) ()		
Present Address	City, State and Zip Code			Work Telephone (Include Area Code) ()		
	Internet e-mail Address					
Permanent Address <i>(leave blank if same as above)</i>	Street Address			Perm Address Telephone (Include Area Code) ()		
	City, State and Zip Code			Date of Application		
Job Interest	Position Applied For			Salary Desired	Date Available for Work	
	Type of Position Applied For <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary <input type="checkbox"/> Summer <input type="checkbox"/> Other:					
Authorization to Work Address	<p>It is unlawful for ComDel/CDI Services, Inc. to hire individuals that are not authorized to work in the United States. Accordingly, ComDel/ CDI Services, Inc. hires only citizens or aliens that are authorized to work in the United States. If you receive an offer from ComDel/CDI Services, Inc. and you accept the offer, before you will be placed on the payroll, you will be required to document that you are a U.S. Citizen or an alien that is authorized to work in the United States.</p> <p>Are you legally authorized to work in the United States indefinitely? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Will you now or in the future require sponsorship for employment visa status (e.g. H-1 B visa status)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>					
Education History <i>(Include Transcripts)</i>	Post-secondary Schools attended (Last School First)		Attendance Dates (Month Year)	Degree Type Earned	Major/Minor	Accumulative Grade Point
	Name of School (City, State)	From	To			
		-				
		-				
		-				
	High School (City, State)	Diploma <input type="checkbox"/> Yes <input type="checkbox"/> No		GED? If Yes, City & State where tested <input type="checkbox"/> Yes <input type="checkbox"/> No		
Additional Education Information <i>(If additional space is needed attach a separate page)</i>	Faculty person who knows you best (Name and Telephone)					
	Memberships in professional or honorary societies and any other extracurricular activities					
	Post graduate research, title and description					
	Publications/Patents Issued (if applicable)					

General Information and Job Requirements	Work Schedule Interests (please select all that apply) Work Day Shifts (M-F) <input type="checkbox"/> Yes Work Overtime <input type="checkbox"/> Yes Work a rotation work schedule <input type="checkbox"/> Yes Work Part-Time <input type="checkbox"/> Yes Work a schedule other than M-F <input type="checkbox"/> Yes			
	Schedule comments:			
	How did you hear about a ComDel/CDI Services, Inc. career? Please check all appropriate boxes and specify. <input type="checkbox"/> Employment Advertisement Name of Publication: _____ <input type="checkbox"/> ComDel/CDI Services Employee Employee's Name: _____ <input type="checkbox"/> Web Site Name of Site: _____ <input type="checkbox"/> Other: _____			
Employment Record <i>List current or most recent employer first, include periods of unemployment, Military Service (show rank/rate at discharge, but not type of discharge).</i>	Employer (company name)	Immediate Supervisor's Name	Phone	Your Job Title
	Street Address	Employment dates (mo. and yr.)		Salary
	City, State, Zip Code	From	To	Begin End
	Company's Product or Service	Reason for leaving or why do you want to leave?		
	Summarize your job duties			
	Employer (company name)	Immediate Supervisor's Name	Phone	Your Job Title
	Street Address	Employment dates (mo. and yr.)		Salary
	City, State, Zip Code	From	To	Begin End
	Company's Product or Service	Reason for leaving or why do you want to leave?		
	Summarize your job duties			
	Employer (company name)	Immediate Supervisor's Name	Phone	Your Job Title
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City, State, Zip Code	From	To	Begin End	
Company's Product or Service	Reason for leaving or why do you want to leave?			
Summarize your job duties				
Employer (company name)	Immediate Supervisor's Name	Phone	Your Job Title	
Street Address	Employment dates (mo. and yr.)		Salary	
City, State, Zip Code	From	To	Begin End	
Company's Product or Service	Reason for leaving or why do you want to leave?			
Summarize your job duties				
Additional Information	Please include any additional Information you think might be helpful to use in considering you for employment, such as additional work experience, activities, accomplishments, etc.			

Technical Competencies	Please list software, instrumentation and tools that you are familiar with: (i.e. MS Office, Calipers, micrometer, etc.)					
Skilled Craft Applicants Only	In what skilled craft areas do you have talent?					
	If you have completed an apprenticeship/technical training in a skilled craft, please list the craft and where completed					
	Was it state endorsed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date Completed	How long have you been a craft person?	Do you carry a state license for your craft? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, what type?	Date of License
Relative(s) at ComDel/CDI Services, Inc.	Name			Relationship		
	Name			Relationship		
Employee Agreements	Have you ever signed an Agreement relating to inventions? non-competition or confidential know-how, etc. with a previous employer? <input type="checkbox"/> Yes <input type="checkbox"/> No					
	If yes to above, please state the company(ies) with whom Agreement was signed			Please include a copy of the Agreement(s) with this application. It will expedite consideration of your employment. CDI must see any such agreements prior to final consideration of your employment.		
Present or Former Federal Government or Military Employees	Have you ever been employed by the Federal Government (either as a civilian or in the military) in a position that may either: (1) prevent you from being employed by ComDel/CDI Services, Inc.? or (2) place restrictions on what work assignments ComDel/ CDI Services, Inc. may give you, if hired, due to Federal "revolving door" or conflict of interest laws? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details					
Please list 3 personal references.						
Name		Phone Number		How long has this person known you?		

I acknowledge and agree to the following:

1. I understand that a pre-placement physical examination, which includes a drug test, is required as a part of the employment process and agree to submit to the same as a condition of employment with ComDel/CDI Services, Inc. I understand that if I receive an offer of employment from ComDel/CDI Services, that offer will be conditioned on receipt by ComDel/CDI Services, Inc. of acceptable results from a pre-employment drug test.
2. Any omission or misrepresentation made by me in this application may be justification for refusal of employment or, if employed, termination of my employment.
3. I understand that if I am hired, I will be required to sign a Confidentiality Agreement as a condition to my employment.
4. I consent to and authorize third parties to provide ComDel/CDI Services, Inc. with any information that ComDel/CDI Services, Inc. requires to render an employment decision. I release all third parties from liability on account of such disclosure.

Signature	Date
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ComDel/CDI Services, Inc. affirms the right of every person to participate in all aspects of employment without regard to race, color, religion, gender, national origin, age, veteran status, marital status, sexual orientation and disability. ComDel/CDI Services, Inc. will provide appropriate opportunity to all persons without regard to mental or physical disability.

We appreciate your interest in ComDel/CDI Services, Inc.!

Background Investigation Authorization

The Fair Credit Reporting Act (1971) requires that we inform you that a background investigation may be conducted as part of our employment screening and selection process. This may include an inquiry to obtain information regarding your character, general reputation, personal characteristics and mode of living. The main objective of the investigation is to verify the information you provided on your application or during the interview process. Upon your written request within a reasonable period, additional information as to the nature and scope of the report, if one is made, will be provided. In addition, if a report is made, you have the right to request details of the report from the consumer reporting agency.

The items of information requested below are needed to process your background investigation. They are intended solely for that purpose.

Social Security Number	Driver's License Number	State
Other Names Used (Including <u>maiden name</u> if applicable - must provide first and last name)		

Home Address for the past 7 years (FILL IN COMPLETELY)

Street Address	City	State	Zip Code	County	From Mo/Yr.	To Mo/Yr.

Have you ever been convicted of a Felony or Misdemeanor?
 Yes No

If yes, please explain:

What State?	What County
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I authorize ComDel/CDI Services, Inc. and/or their background investigations vendor to investigate my background as it pertains to employment considerations. This may include investigations of employment history and performance, personal/professional references, educational history, licenses and information contained in public records including credit, criminal, motor vehicle data and worker's compensation. I release all persons, companies or corporations furnishing such information from liability and responsibility. A photo copy of this document may be substituted for the original.

Name of Applicant	
Signature of Potential Employee X	Date