



A-LAB CORP.
 3050 DRYDEN ROAD
 DAYTON, OH 45439
 937.293.0333

EMPLOYMENT APPLICATION

APPLICANTS ARE CONSIDERED FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, OR NON-JOB RELATED MEDICAL CONDITIONS OR HANDICAPS.

Personal Data

Name _____ Date _____
Last First Initial

Address _____
Street City State Zip

Phone No. _____

Employment Desired

FULL TIME PART TIME TEMPORARY

SHIFT(S) YOU CAN WORK CIRCLE SHIFT PREFERRED
 1st 2nd SHIFT 1st 2nd

POSITION _____ DATE YOU CAN START _____ PAY RANGE DESIRED _____

SOCIAL SECURITY NUMBER _____ ARE YOU 18 YEARS OLD? _____ YES _____ NO

ARE YOU LEGALLY ELIGIBLE FOR EMPLOYMENT IN THE UNITED STATES? _____ YES _____ NO
 (IF OFFERED EMPLOYMENT, YOU WILL BE REQUIRED TO PROVIDE DOCUMENTATION TO VERIFY ELIGIBILITY.)

WHO REFERRED YOU TO US? _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY? _____
 (CONVICTION WILL NOT NECESSARILY DISQUALIFY AN APPLICANT FROM EMPLOYMENT)

IF YES EXPLAIN _____

Education

PLEASE INDICATE EDUCATION OR TRAINING WHICH YOU BELIEVE QUALIFIES YOU FOR THE POSITION YOU ARE SEEKING.

| School | Name & Location | Years Completed | Degree Received / Major Field |
|--------------------------------------|-----------------|-----------------|-------------------------------|
| High | | | |
| | | | |
| College | | | |
| | | | |
| Graduate School | | | |
| | | | |
| Professional Licenses or Memberships | | Expires: | |
| | License # | | |

(YOU NEED NOT DISCLOSE MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS THAT MAY REVEAL INFORMATION REGARDING RACE, COLOR, CREED, SEX, RELIGION, NATIONAL ORIGIN, ANCESTRY, AGE, DISABILITY, MARITAL STATUS, VETERAN STATUS OR ANY OTHER PROTECTED STATUS.)

THIS APPLICATION FOR EMPLOYMENT IS GOOD FOR 30 DAYS ONLY.
 CONSIDERATION FOR EMPLOYMENT AFTER 30 DAYS REQUIRES A NEW APPLICATION.

Work Experience ACCOUNT FOR ANY EMPLOYMENT GAPS GREATER THAN 3 MONTHS

| Employer (Start with most Recent, including U.S. Military Service) | No. of Years Employed | Title | Pay Rate Start / End | Supervisor/ Phone | Reason for Leaving |
|--|-----------------------|-------|----------------------|-------------------|--------------------|
| Name | | | | | |
| Address | | | | | |
| Duties | | | | | |
| Name | | | | | |
| Address | | | | | |
| Duties | | | | | |
| Name | | | | | |
| Address | | | | | |
| Duties | | | | | |
| Name | | | | | |
| Address | | | | | |
| Duties | | | | | |

IF YOU WISH TO DESCRIBE ADDITIONAL WORK EXPERIENCE, ATTACH THE ABOVE INFORMATION FOR EACH POSITION TO A SEPARATE PEICE OF PAPER.

EXPLAIN ANY GAPS IN WORK HISTORY: _____

HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM A JOB? YES NO IF YES, EXPLAIN: _____

SKILLS:

OFFICE: DATA ENTRY/ EXCEL OR TYPEWRITER _____ WPM. LOTUS1,2,3 CRT OTHER: _____

WORD PROCESSING WORDPERFECT MSWORD OTHER

OTHER SOFTWARE SKILLS: _____

REFERENCES

List three persons, not related to you, who have known you for at least a year.

| | | |
|------|---------|-------|
| Name | Address | Phone |
| Name | Address | Phone |
| Name | Address | Phone |

HAVE YOU EVER BEEN EMPLOYED IN ANY FACILITY OF GRAY AMERICA CORP.? YES NO

IF SO, PLEASE STATE FACILITY NAME AND LOCATION AND DATES OF EMPLOYMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize A-Lab to verify their accuracy and to obtain reference information on my work performance. I hereby release L&H from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

DATE _____ SIGNATURE _____