

## **Application for Employment**

## Equal Opportunity Employer

## **Personal Information**

| Name (LAST NAME FIRST)   |  |                          | Social Security Number     |                   |                            |                        |  |  |
|--|--|--------------------------|----------------------------|-------------------|----------------------------|------------------------|--|--|
| Address  | City   |                          | State                      | Zip Code          |                            |                        |  |  |
| Home Phone Number  | Cell Phone Number  |                          |                            |                   |                            |                        |  |  |
| Driver's License/Identification No                                 | Referred By  |                          |                            |                   |                            |                        |  |  |
| Employment Desired   |  |                          |                            |                   |                            |                        |  |  |
| Position   |  | Date You Can Start       |                            |                   | Salary Desired             |                        |  |  |
| Are you employed?  | YES NO   |                          | If so, may we your present |                   | YES                        | □ NO                   |  |  |
| <b>Education History</b>   |  |                          |                            |                   |                            |                        |  |  |
| Name   | & Location of School                                       |                          | Years A                    | ttended           | Did You Graduate?          | Subjects Studied       |  |  |
| High School  |  |                          |                            |                   |                            |                        |  |  |
| College  |  |                          |                            |                   |                            |                        |  |  |
| Trade, Business or Correspondence Scho                             |  |                          |                            |                   |                            |                        |  |  |
| General Information  |  |                          |                            |                   |                            |                        |  |  |
| Subjects of Special Study/Research Work or Special Training/Skills |  |                          |                            |                   |                            |                        |  |  |
|  |  |                          |                            |                   |                            |                        |  |  |
|  |  |                          |                            |                   |                            |                        |  |  |
| U.S. Military or Naval Service                                     |  |                          | Rank                       |                   |                            |                        |  |  |
| Former Employers   |  |                          |                            |                   |                            |                        |  |  |
| Date (Month & Year)  | Name & Phone Num   | mber Salary              | Posit                      | ion               | Reason for Leaving         | May we Contact?        |  |  |
| From   |  |                          |                            |                   |                            |                        |  |  |
| То   |  |                          |                            |                   |                            |                        |  |  |
| From   |  |                          | T                          |                   |                            |                        |  |  |
| То   |  |                          |                            |                   |                            |                        |  |  |
| References (Please name preferably be associates from              | 3 persons, other than your far your work or academic circl | amily members and rele.) | latives, who               | are in a position | on to evaluate your charac | ter. References should |  |  |
| Name Phone Number  |  |                          | Business                   |                   |                            | Years Known            |  |  |
|  |  |                          |                            |                   |                            |                        |  |  |
|  |  |                          | 1                          |                   |                            |                        |  |  |
|  |  |                          | †                          |                   |                            |                        |  |  |



**Criminal History** 

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| Have you ever been convicted of a misdemeanor or felony? |             | YES          | □ NO                         | If yes, please explain   |
|--|-------------|--------------|------------------------------|--|
|  |             |              |                              |  |
| Are you legally eligible for employment in this country? |             | YES          | □ NO                         |  |
|  |             |              |                              |  |
| •  |             | •            |                              | plete to the best of my knowledge and understand that, if tion shall be grounds for dismissal. |
| understand that, as a cond                               | dition of m | y conside    | eration for employment with  | AIV, L.P., or as a condition of my continued employment  |
| with AIV, L.P., the company                              | may obtai   | in a consu   | umer report that includes, b | out is not limited to, employment and education verifications,                                 |
| social security verification, o                          | criminal ar | nd civil his | story, drug screen, personal | Interviews, DMV records, any other public records and any                                      |
| other information bearing o                              | n my char   | acter, ger   | neral reputation, personal c | haracteristics and trustworthiness.  |
| hereby authorize and cons                                | ent to AIV  | 's procure   | ement of such a report. I un | derstand that, pursuant to the federal Fair Credit Reporting                                   |
| Act, AIV, L.P. will provide me                           | e with a co | py of any    | such report if the informat  | ion contained in such report is, in any way, to be used in                                     |
| making a decision regardin                               | g my fitnes | ss for em    | ployment. I further underst  | and that such report will be made available to me prior to an                                  |
| such decision being made,                                | along with  | the nam      | e and address of the report  | ing agency that produced the report.   |
|  |             |              |                              |  |
|  |             |              |                              |  |
|  |             |              |                              |  |
| Signature of Applicant or                                | Employee    | !            | Date                         |  |
|  |             |              |                              |  |
| Printed Name of Applican                                 | t or Emplo  | oyee         |                              |  |