



Date: _____

I. PERSONAL INFORMATION

Last Name: _____ First Name: _____ Middle Name: _____

Current Address: _____ City: _____ State: _____ Zip: _____

Home Phone No.: (____) _____ Mobile Phone No.: (____) _____

Alt. Phone No.: (____) _____ E-Mail Address: _____

Can you submit documentation that you are legally eligible to work in the United States? Yes No

Transportation? Yes No A résumé? Yes No At least 21 years old? Yes No

How far are you willing to commute to work (in minutes)? _____

Any special skills or work history you feel we should know about? _____

Availability: _____

Are you CPR and/or First Aid certified? Yes No

II. POSITION

What position[s] are you seeking? _____

Full-time employment? Yes No Part-time employment? Yes No Temp work Yes No

How did you learn about the position? _____ Salary or hourly wage desired: _____

III. PERSONAL COMMENTS

Describe your strengths for the position for which you are applying: _____

Describe any weaknesses for the position for which you are applying: _____

Please provide any other information that you consider relevant and important to your ability to perform the duties of the job for which you are applying, such as future educational plans, extracurricular activities, hobbies, and civil, fraternal, and charitable organizations (excluding information that may be indicative of race, color, religion, national origin, physical or mental disability, sexual orientation, or any other protected characteristic under federal, state, or local law):

(continued)

Please indicate what field(s) you have experience with

Years of Experience

<input type="checkbox"/> Farming / Growing _____	0	1	2	3	4	5	+
<input type="checkbox"/> Trimming _____	0	1	2	3	4	5	+
<input type="checkbox"/> General Farm Labor _____	0	1	2	3	4	5	+
<input type="checkbox"/> Office/ Clerical/ Administration _____	0	1	2	3	4	5	+
<input type="checkbox"/> Other _____	0	1	2	3	4	5	+

IV. EDUCATIONAL BACKGROUND, MILITARY SERVICE, PROFESSIONAL POSITIONS, AND ADDITIONAL INFORMATION

EDUCATION: Please list any additional educational, vocational, and professional information, such as special areas of research, training, seminars, or similar activities that are relevant to the position for which you are applying:

V. EMPLOYMENT EXPERIENCE

Starting with current employment, if any, please list employment history in reverse order:^[1]_[SEP]

Present or last employer: _____

Address: _____ City: _____ State: _____ Zip: _____

Dates of employment: From _____ to _____ Position(s) held: _____

Describe your duties: _____

Reason for leaving: _____

Name and title of immediate supervisor: _____

May we contact your current or last employer? Yes No Contact phone number _____

Contact email address: _____

Prior employer: _____

Address: _____ City: _____ State: _____ Zip: _____

Dates of employment: From _____ to _____ Position(s) held: _____

Describe your duties: _____

Reason for leaving: _____

Name and title of immediate supervisor: _____

May we contact your current or last employer? Yes No Contact phone number _____

Contact email address: _____

(continued)

Prior employer: _____

Address: _____ City: _____ State: _____ Zip: _____

Dates of employment: From _____ to _____ Position(s) held: _____

Describe your duties: _____

Reason for leaving: _____

Name and title of immediate supervisor: _____

May we contact your current or last employer? [] Yes [] No Contact phone number _____

Contact email address: _____

REFERENCES: Please provide the names, addresses, and telephone numbers of at least three (3) references who are not related to you:

Name: _____ Telephone No.: _____

Relationship: _____ Business: _____ Email Address: _____

Name: _____ Telephone No.: _____

Relationship: _____ Business: _____ Email Address: _____

Name: _____ Telephone No.: _____

Relationship: _____ Business: _____ Email Address: _____

VI. ACKNOWLEDGMENT AND SIGNATURE

I certify that all the information contained within this application (and any and all attachments) is true and correct to the best of my knowledge, and I understand that any false information or omissions may lead to the rejection of my application or, if I am employed, discipline up to and including termination at the time any such false information or omission is discovered.

I authorize investigation of all statements contained within this application; authorize Dark Solutions to secure information about my background and experience with former employers, educational institutions, and any relevant agencies; and authorize those parties to provide information to Dark Solutions concerning my background and experience. I hereby release Dark Solutions, and all parties providing information to Dark Solutions about my background and experience, from any liability whatsoever arising therefrom. I give my express written consent to receive text messages of any nature from Dark Staffing Solutions.

I understand that, if I am employed, my employment with Dark Solutions can be terminated at will, with or without cause, and with or without notice, at any time, either at my option or the option of Dark Solutions. I further understand that nothing in this application, or in any oral or written statement provided to me by the Dark Solutions, will limit these rights to terminate my employment at will, and no representative of Dark Solutions will have any authority to change this at-will relationship.

I understand that any offer of employment is conditioned on my providing satisfactory proof of my identity and proof of eligibility to work in the United States. I further understand that this application is valid for any position Dark Solutions has open now or in the future and by providing my email address I elect to receive periodic job alert emails in which I may opt out of at any time.

Date: _____

Applicant Name: _____

Applicant Signature: _____