| Commonway Monage | Data | |
|------------------|------|--|
| Company Name | Date | |
| | | |

Please Print Clearly

APPLICATION FOR EMPLOYMENT

Please Answer All Questions. Résumés Are Not A Substitute For A Completed Application.

I UNDERSTAND THAT NEITHER THIS APPLICATION NOR ANY COMMUNICATION BY A MANAGEMENT REPRESENTATIVE IS INTENDED TO CREATE OR DOES CREATE A CONTRACT OF EMPLOYMENT, OFFER, OR PROMISE OF EMPLOYMENT FOR A DEFINITE TERM. I ACKNOWLEDGE THAT IF HIRED BY THE COMPANY, EMPLOYMENT IS ON AN AT-WILL BASIS IN ACCORDANCE WITH STATE LAW. THIS MEANS THE COMPANY IS FREE TO TERMINATE MY EMPLOYMENT AT ANY TIME, WITH OR WITHOUT CAUSE OR ADVANCE NOTICE, IN ACCORDANCE WITH STATE LAW, AND ACCEPTANCE OF EMPLOYMENT IS NOT A CONTRACT OF EMPLOYMENT FOR ANY SPECIFIED TIME. SIMILARLY, I AM FREE TO TERMINATE MY EMPLOYMENT WITH THE COMPANY AT ANY TIME FOR ANY REASON. THIS AT-WILL PROVISION MAY BE MODIFIED OR WAIVED ONLY IN A WRITTEN AGREEMENT SIGNED BY AN AUTHORIZED REPRESENTATIVE OF THE COMPANY AND ME. I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF THE COMPANY, AND I UNDERSTAND THAT THE COMPANY HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL OR ITS ARBITRATION POLICY, IF ANY.

We are an equal opportunity employer. Applicants are considered for positions without regard to race, religion, sex, national origin, age, disability, or any other consideration made unlawful by applicable federal, state, or local laws.

| Position Applied For | Name | | | | | |
|---|--|--|--|--|--|--|
| Telephone Number () Alter | rnate or Cellular Telephone Number () | | | | | |
| Present Address Street, Apt. or Unit No./City/State/Zip | How long have you lived there/ Years Months | | | | | |
| Previous Address Street, Apt. or Unit No./City/State/Zip | How long did you live there Years Months | | | | | |
| Desired Salary/Hourly Rate | | | | | | |
| If under the age of 18, can you produce the necessary work cer- | tificate at the time of employment? Yes □ No □ | | | | | |
| Type of employment desired? Full-time □ | Part-time ☐ (Specify Hours) | | | | | |
| Are you willing to work overtime? Yes □ No □ | Date on which you can start work if hired | | | | | |
| Have you previously applied for employment with this Company? Yes □ No □ | | | | | | |
| If Yes, when and where did you apply? | | | | | | |
| Have you ever been employed by this Company? Yes □ No □ If Yes, provide dates of employment, location, and reason for separation from employment. | | | | | | |

INSTRUCTIONS FOR ANSWERING THE NEXT TWO QUESTIONS:

- 1. Hawaii applicants: Do not answer the following two questions.
- 2. District of Columbia and Washington applicants: Limit any response to the past ten (10) years.
- 3. Utah applicants: Limit any response to felony convictions only.
- 4. Arizona, District of Columbia, Illinois, Missouri, Rhode Island and Utah applicants: Do not respond to second question regarding arrests.
- California applicants: Do not include misdemeanor marijuana-related convictions that are more than two (2) years old or misdemeanor convictions for which probation was successfully completed or otherwise discharged and the case was judicially dismissed.

- 6. Massachusetts applicants: Limit any response regarding misdemeanor convictions to the last five (5) years and to those which were not a first offense for drunkenness, simple assault, speeding, a minor traffic violation or disturbing the peace. Applicants with a sealed record on file with the Massachusetts Commissioner of Probation may answer "No Record" with respect to: 1) all inquiries relating to prior convictions or arrests; 2) misdemeanor convictions older than five (5) years; and 3) first time convictions for simple assault, drunkenness, speeding, minor traffic violations or disturbing the peace.
- 7. North Dakota and Oregon applicants: Regarding arrests, limit your response to pending charges that are less than one (1) year old.
- 8. Indiana applicants: Regarding arrests limit your response to pending charges for felonies and class A misdemeanors that are less than one (1) year old.
- 9. Michigan applicants: Regarding arrests, limit your response to felony arrests awaiting conviction or dismissal.
- 10. Connecticut applicants: You are not required to disclose the existence of any arrest, criminal charge, or conviction, the records of which have been erased. Criminal records subject to erasure are records pertaining to a finding of delinquency or the fact that a child was a member of a family with service needs, an adjudication as a youthful offender, a criminal charge that has been dismissed or nolled (not prosecuted), a criminal charge for which the person was found not guilty, or a conviction for which the offender received an absolute pardon. Any person whose criminal records have been erased is deemed to have never been arrested within the meaning of the law as it applies to the particular proceedings that have been erased, and may so swear under oath.

| | Any person whose criminal records have es to the particular proceedings that have | | | | within the meaning |
|--|--|--|---------------------------------|--|---|
| 11. New York applicants | s: An ex-offender who is denied employing of the applicant's request for such infor | ment may, upon wri | | | of the reason(s) for |
| 12. All applicants: Do no | ot include convictions that were sealed, e o a diversion program. | | nnulled by a co | urt, or expunged | , or convictions that |
| Have you ever plead guil Yes □ No □ | ty or no contest to, or been convicted of | any criminal offens | se other than the | applicable exce | ptions listed above? |
| Have you ever been arres | ted for any matters for which you are out | t on bail or on your | own recognizan | ce pending trial? | Yes 🗖 No 🗖 |
| | ONLY: If you answered Yes, to either e instructions so that individual circumst | | | e provide the da | te(s) and explain in |
| nature of the crime, its s frequency of convictions | arrests will not automatically disqualiferiousness, whether the conviction(s) so the applicant's age at the time of contact of the time work and educational history | ubstantially relates viction, the time eld | to the position upsed since the | 's functions and date of conviction | qualifications, the on or completion of |
| Have you ever initiated a | n act of violence in the workplace? Yes | s 🗖 No 🗖 | | | |
| | e date(s) and explain so that individual circoyment.) | | | "Yes" answer w | ill not necessarily |
| <u> </u> | skills that you feel qualify you for the job ration, special tools or machines, etc.) | • | | | nming/language, |
| Education | School Name and Location | Course of Study | Graduate? | # of Years Completed | Degree/Major |
| High School | | | | | |
| College | | | | | |
| Bus./Tech./Trade or Post College | | | | | |
| Honors Received | | | | | |
| Is any additional informa | tion relative to change of name, use of an | n assumed name, or | nickname neces | sary to enable a | check on your work |

WORK EXPERIENCE: Please list the names of your present or previous employers in chronological order with present or last employer listed first. Account for <u>all</u> periods of time including any period of unemployment. If self-employed, supply firm name and business references. You may include any verifiable work performed on a volunteer basis, internships, or military service. Your failure to completely respond to each inquiry may disqualify you for future consideration from employment.

| Name | | | | | |
|--|--|---|----------------------|--|--|
| Name | | Address | Type of Business | | |
| Telephone (|) | Dates Employed: From | /To// | | |
| Job Title | | Duties | | | |
| Supervisor's Name | | May we contact? ☐ Yes ☐ No ☐ | If No, why not? | | |
| Wages: Start | Final | Reason for Leaving | | | |
| What will this employer say | was the reason y | our employment terminated? | | | |
| How much notice did you gi | ive when resignin | g? If none, explain. | | | |
| Employer | | | | | |
| Name | | Address | Type of Business | | |
| Telephone (|) - | Dates Employed: From | / To / | | |
| | | | | | |
| | | Duties | | | |
| Job Title | | Duties | | | |
| Job TitleSupervisor's Name | | Duties May we contact? □ Yes □ No In | | | |
| Job Title Supervisor's Name Wages: Start What will this employer say | _ Final was the reason y | Duties May we contact? ☐ Yes ☐ No In Reason for Leaving rour employment terminated? | f No, why not? | | |
| Job Title Supervisor's Name Wages: Start What will this employer say How much notice did you gi | _ Final was the reason y | Duties May we contact? ☐ Yes ☐ No In Reason for Leaving rour employment terminated? | f No, why not? | | |
| Job Title Supervisor's Name Wages: Start What will this employer say How much notice did you gi | _ Final was the reason y | Duties May we contact? ☐ Yes ☐ No In Reason for Leaving rour employment terminated? | f No, why not? | | |
| Job Title Supervisor's Name Wages: Start What will this employer say How much notice did you gi Employer Name | _ Final was the reason y ive when resignin | Duties May we contact? ☐ Yes ☐ No In Reason for Leaving our employment terminated? ag? If none, explain Address | f No, why not? | | |
| Supervisor's Name Wages: Start What will this employer say How much notice did you gi Employer Name Telephone (| _ Final was the reason y ive when resigning | Duties May we contact? □ Yes □ No In Reason for Leaving | Type of Business | | |
| Supervisor's Name Wages: Start What will this employer say How much notice did you gi Employer Name Telephone (Job Title | Final was the reason y ive when resigning | Duties May we contact? □ Yes □ No Is Reason for Leaving rour employment terminated? ag? If none, explain Address Dates Employed: From Duties | Type of Business | | |
| Supervisor's Name Wages: Start What will this employer say How much notice did you gi Employer Name Telephone (Job Title Supervisor's Name | Final was the reason y ive when resignin | Duties May we contact? □ Yes □ No Is Reason for Leaving rour employment terminated? ag? If none, explain Address Dates Employed: From Duties | Type of Business To | | |
| Supervisor's Name Wages: Start What will this employer say How much notice did you gi Employer Name Telephone (Job Title Supervisor's Name Wages: Start | Final was the reason y ive when resigning Final | Duties May we contact? ☐ Yes ☐ No Is Reason for Leaving our employment terminated? ag? If none, explain Address Dates Employed: From Duties May we contact? ☐ Yes ☐ No Is Reason for Leaving No Is Reason for Leaving | Type of Business To | | |
| Job Title Supervisor's Name Wages: Start What will this employer say How much notice did you gi Employer Name Telephone (Job Title Supervisor's Name Wages: Start What will this employer say | Final Final Final was the reason y | Duties May we contact? ☐ Yes ☐ No Is Reason for Leaving our employment terminated? ag? If none, explain Address Dates Employed: From Duties May we contact? ☐ Yes ☐ No Is Reason for Leaving No Is Reason for Leaving | Type of Business | | |

REFERENCES

Please list the names of additional work-related references we may contact. Individuals with no prior work experience may list school or volunteer related references.

| NAME | POSITION | COMPANY | WORK RELATIONSHIP (i.e., supervisor, co-worker) | TELEPHONE |
|------|----------|---------|---|-----------|
| | | | | |
| | | | | |

Please list the names of personal references (not previous employers or relatives) who know you well that we may contact.

| NAME | OCCUPATION | ADDRESS | TELEPHONE NUMBER | NUMBER OF YEARS KNOWN |
|------|------------|---------|------------------|--------------------------|
| | | | | |
| | | | | |

APPLICANT CERTIFICATION

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

I understand that the Company may now have, or may establish, a drug-free workplace or drug and/or alcohol testing program consistent with applicable federal, state, and local law. If the Company has such a program and I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. I also understand that all employees of the location, pursuant to the Company's policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or controlled drugs. If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and drug testing consistent with the Company's policies and applicable federal, state, and local law.

If employed by the Company, I understand and agree that the Company, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, and computers) and, in certain circumstances, my personal property.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign a confidentiality, non-compete, and/or conflict of interest statement.

I certify that all the information on this application, my résumé, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.

I UNDERSTAND THAT NEITHER THIS APPLICATION NOR ANY COMMUNICATION BY A MANAGEMENT REPRESENTATIVE IS INTENDED TO CREATE OR DOES CREATE A CONTRACT OF EMPLOYMENT, OFFER, OR PROMISE OF EMPLOYMENT FOR A DEFINITE TERM. I ACKNOWLEDGE THAT IF HIRED BY THE COMPANY, EMPLOYMENT IS ON AN AT-WILL BASIS IN ACCORDANCE WITH STATE LAW. THIS MEANS THE COMPANY IS FREE TO TERMINATE MY EMPLOYMENT AT ANY TIME, WITH OR WITHOUT CAUSE OR ADVANCE NOTICE, IN ACCORDANCE WITH STATE LAW, AND ACCEPTANCE OF EMPLOYMENT IS NOT A CONTRACT OF EMPLOYMENT FOR ANY SPECIFIED TIME. SIMILARLY, I AM FREE TO TERMINATE MY EMPLOYMENT WITH THE COMPANY AT ANY TIME FOR ANY REASON. THIS AT-WILL PROVISION MAY BE MODIFIED OR WAIVED ONLY IN A WRITTEN AGREEMENT SIGNED BY AN AUTHORIZED REPRESENTATIVE OF THE COMPANY AND ME. I AGREE TO CONFORM TO THE RULES AND REGULATIONS OF THE COMPANY, AND I UNDERSTAND THAT THE COMPANY HAS COMPLETE DISCRETION TO MODIFY SUCH RULES AND REGULATIONS AT ANY TIME, EXCEPT THAT IT WILL NOT MODIFY ITS POLICY OF EMPLOYMENT AT-WILL OR ITS ARBITRATION POLICY, IF ANY.

I authorize the Company or its agents to confirm all statements contained in this application and/or résumé as it relates to the position I am seeking and to the extent permitted by federal, state, or local law. I agree to complete any requisite authorization forms for the background investigation.

I authorize and consent to, without reservation, any party or agency contacted by this employer to furnish the above-mentioned information. I hereby release, discharge and hold harmless, to the extent permitted by federal, state, and local law, any party delivering information to the Company or its duly authorized representative pursuant to this authorization from any liability, claims, charges, or causes of action which I may have as a result of the delivery or disclosure of the above requested information. I hereby release from liability the Company and its representative for seeking such information and all other persons, corporations, or organizations furnishing such information.

If hired by this Company, I understand that I will be required to provide genuine documentation establishing my identity and eligibility to be legally employed in the United States by this Company. I also understand this Company employs only individuals who are legally eligible to work in the United States for this Company.

THIS APPLICATION WILL BE CONSIDERED ACTIVE FOR A MAXIMUM OF SIXTY (60) DAYS. IF YOU WISH TO BE CONSIDERED FOR EMPLOYMENT AFTER THAT TIME, YOU MUST REAPPLY.

I CERTIFY THAT ALL OF THE INFORMATION THAT I HAVE PROVIDED ON THIS APPLICATION IS TRUE, ACCURATE AND COMPLETE. Applicant Signature _____ Date ____/ If the applicant is a minor, the foregoing release and consent must be signed by the applicant's parent or legal guardian. Signature by the applicant's parent or legal guardian constitutes acknowledgement by the applicant and the parent or legal guardian that the Company, to the extent permitted by federal, state, and local law, can test the applicant for controlled substances, conduct inspections of property without notice, and communicate screen results to Company personnel who need to know, the applicant, and the applicant's legal guardian. Witness Parent/Legal Guardian Date Date UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100. I have read and understand the above statement. Applicant's Signature UNDER MASSACHUSETTS LAW, IT IS UNLAWFUL FOR AN EMPLOYER TO REQUIRE OR TO ADMINISTER A LIE DETECTOR TEST AS A CONDITION OF EMPLOYMENT OR CONTINUED EMPLOYMENT. FEDERAL AND/OR STATE LAW MAY PROHIBIT THE USE OF POLYGRAPH OR SIMILAR TESTS AS WELL. THIS APPLICATION MAY NOT BE APPLICABLE FOR ALL INDUSTRIES.

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