

GENERAL INFORMATION

APPLICANT NAME _____

Can you, after employment, submit verification of your legal right to work in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No	Are you 16 years old or over?	<input type="checkbox"/> No <input type="checkbox"/> Yes ▶	Age	<input type="checkbox"/> 16 <input type="checkbox"/> 17 <input type="checkbox"/> 18 or over
Were you previously employed by Insperty and/or the Insperty Client Company to which you are applying?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, give dates:		From: (month/year)	To: (month/year)
Can you perform the essential functions of the job?	<input type="checkbox"/> Yes <input type="checkbox"/> No				
List any relatives working for Insperty and/or the Insperty Client Company to which you are applying:					

EMPLOYMENT HISTORY (List all work experience beginning with the present or most recent job. Use back of application, if necessary).

MOST RECENT JOB HELD	Name of Employer			Type of Business	
	Address		City	State	ZIP Code
	Title			Telephone Number ()	
	Name and Title of Supervisor			Type of Employment <input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time	
	May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Employed From (month/year)	Employed To (month/year)	Last Salary \$	
	Brief Description of Duties			Reason for Leaving	
PREVIOUS EMPLOYMENT	Name of Employer			Type of Business	
	Address		City	State	ZIP Code
	Title			Telephone Number ()	
	Name and Title of Supervisor			Type of Employment <input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time	
	May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Employed From (month/year)	Employed To (month/year)	Last Salary \$	
	Brief Description of Duties			Reason for Leaving	
PREVIOUS EMPLOYMENT	Name of Employer			Type of Business	
	Address		City	State	ZIP Code
	Title			Telephone Number ()	
	Name and Title of Supervisor			Type of Employment <input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time	
	May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Employed From (month/year)	Employed To (month/year)	Last Salary \$	
	Brief Description of Duties			Reason for Leaving	
PREVIOUS EMPLOYMENT	Name of Employer			Type of Business	
	Address		City	State	ZIP Code
	Title			Telephone Number ()	
	Name and Title of Supervisor			Type of Employment <input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time	
	May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Employed From (month/year)	Employed To (month/year)	Last Salary \$	
	Brief Description of Duties			Reason for Leaving	

ADDITIONAL INFORMATION

APPLICANT NAME _____

PREVIOUS EMPLOYMENT	Name of Employer			Type of Business		
	Address		City	State	ZIP Code	
	Title			Telephone Number ()		
	Name and Title of Supervisor			Type of Employment <input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time		
	May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Employed From (month/year)	Employed To (month/year)	Last Salary \$		
	Brief Description of Duties			Reason for Leaving		
PREVIOUS EMPLOYMENT	Name of Employer			Type of Business		
	Address		City	State	ZIP Code	
	Title			Telephone Number ()		
	Name and Title of Supervisor			Type of Employment <input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time		
	May We Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	Employed From (month/year)	Employed To (month/year)	Last Salary \$		
	Brief Description of Duties			Reason for Leaving		

CRIMINAL RECORD INFORMATION (Instructions for answering the next two questions below):

- A. **All Applicants.** Do not include convictions that were sealed, eradicated, erased, annulled by a court, expunged, pardoned, or deferred and withdrawn.
- B. **District of Columbia, Illinois, and Rhode Island Applicants.** Do not respond to the second question (regarding pending charges).
- C. **California Applicants.** Do not include: a misdemeanor conviction for possession or transportation of a small amount of marijuana (28.5 grams or less) if the conviction is more than two (2) years old; participation in any pretrial or post trial diversion program for drug or alcohol rehabilitation; or a misdemeanor conviction for which probation was successfully completed or otherwise discharged and the case was judicially dismissed.
- D. **Colorado Applicants.** Exclude information involving any record of civil or military disobedience unless such matters resulted in a plea of guilty or a conviction by a court of competent jurisdiction.
- E. **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 nulled (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.
- F. **Hawaii Applicants.** Do not answer the following two questions.
- G. **Massachusetts Applicants.** Do not answer the following two questions.
- H. **Michigan Applicants.** Regarding pending charges, limit your response to felony offenses.
- I. **Utah Applicants.** Regarding convictions, limit your response to felony convictions. Do not respond to the second question (regarding pending charges).

1. Convictions/Pleas. In the past ten (10) years, have you ever been convicted of, or pled guilty or no contest to, any criminal offense other than any applicable exceptions listed above?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Pending Charges. Have you been arrested for any matters for which you are now out on bail or on your own recognizance pending trial?	<input type="checkbox"/> Yes <input type="checkbox"/> No

CRIMINAL RECORDS:
 If you answered Yes to either of the above two questions, please provide the date(s) and describe that criminal record so the individual circumstances can be considered. ***Criminal convictions or arrests will not automatically disqualify an applicant from employment.***

ADDITIONAL INFORMATION

APPLICANT NAME _____

BUSINESS REFERENCES (List three individuals, in addition to listed employment references, known to you for at least three years).

NAME	OCCUPATION/ASSOCIATION	TELEPHONE
1.		()
2.		()
3.		()

Please include any other information you think would be helpful to us in considering you for employment, such as additional work experience, articles/books published, activities, honors received, etc. You may omit all information that would indicate age, sex, sexual orientation, race, religion, color, national origin, or disability.

AGREEMENT (Please read the following statement carefully).

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also agree that falsification or significant omission of information requested in this application or in the application process may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I authorize all persons listed above (and on the accompanying resume, if any) to give Insperity any and all information concerning my previous employment and education and any pertinent information they may have, personal or otherwise, and release all parties, such persons and Insperity, from liability for any damage that may result from furnishing same to Insperity.

I understand that Insperity and its client have agreed that Insperity will provide workers' compensation insurance coverage for its employees. In the event of an injury in the workplace, I agree that my sole remedy lies in coverage under Insperity's workers' compensation insurance policy.

If employed by Insperity and its client company, I agree to abide by the policies and procedures of Insperity and its client company, which include Insperity Anti-Harassment Policy. I further understand that my employment can be terminated, with or without cause or notice, at any time, at the discretion of Insperity, the client company or myself. I further understand that no manager or representative of Insperity or its client company other than the president of Insperity has any authority to enter into any agreement, oral or written, on behalf of Insperity for a term of employment or to make any assurance or promise of continued employment.

I understand that Insperity and/or its client company may obtain a consumer and/or investigative consumer report for employment purposes that may include information regarding prior employment, work experience and performance, reasons for employment termination, and information as to character, general reputation, personal characteristics, or mode of living. The report may also contain a records check of driving, criminal, credit, education, degrees, professional licenses and/or certification records depending on the position. By signing this application, I authorize the procurement of a consumer and/or investigative consumer report by Insperity as part of the pre-employment background investigation and if hired, at any time during my employment. California Applicants: I further understand that Insperity and/or its client company may obtain Public Records about me as part of an internal background investigation and that I may waive my right to receive a copy of such Public Records by checking this box:

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 understand and agree that, subject to applicable law, I may be required to take a drug and alcohol screening test. I hereby give my voluntary consent for a blood and/or urine sample to be collected from me and submitted for testing. I also consent to the release of the test results to Insperity and/or its client company. I understand that any positive drug or alcohol result may preclude my employment.

SIGN AND DATE THE FORM

Applicant's Signature	Date Signed (mm/dd/yyyy)
Print Full Name	Last 4 Digits of Social Security Number