



## EMPLOYMENT HISTORY

**Do not** write “see resume” on this section or anywhere on this application. ECT will consider for employment only those applicants who complete this application entirely.

Please list your previous employers in chronological order with the present or last employer first. Account for all periods of time including military service and any period of unemployment. If self-employed, give name of company and supply business references.

Company Name	From (Mo/Yr)	Starting Pay	Job Title
Street Address	To (Mo/Yr)	Ending Pay	Reason for Leaving
City State Zip	Supervisor	Phone #	
Job Duties and Responsibilities:			
Company Name	From (Mo/Yr)	Starting Pay	Job Title
Street Address	To (Mo/Yr)	Ending Pay	Reason for Leaving
City State Zip	Supervisor	Phone #	
Job Duties and Responsibilities:			
Company Name	From (Mo/Yr)	Starting Pay	Job Title
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Street Address	To (Mo/Yr)	Ending Pay	Reason for Leaving
City State Zip	Supervisor	Phone #	
Job Duties and Responsibilities:			

*If more space is needed, please use supplemental employment history sheet.*

## BACKGROUND SPECIFICS

May we contact your present employer?

Yes  No

If no, please explain: \_\_\_\_\_

Have you ever been discharged or asked to resign from any job?

Yes  No

If yes, please explain: \_\_\_\_\_

Have you ever been reprimanded, suspended, or terminated for fighting or demonstrating any violent behavior on the job, whether or not it was your fault?

Yes  No

If yes, please explain: \_\_\_\_\_

Have you ever been reprimanded, suspended or terminated by any employer for any act of harassment, whether based upon gender, race, national origin or any other trait or characteristic?

Yes  No

If yes, please explain: \_\_\_\_\_

Please explain any gaps in your employment history: \_\_\_\_\_

Please explain why you feel you are fully qualified for the position sought. Include a brief explanation of the skills, qualifications, or other characteristics that will ensure you will be successful in this position?

Have you ever been convicted or pled no contest or nolo contendere to:

[a] a felony?  Yes  No

[b] a misdemeanor (including any alcohol or substance related traffic violations) that has not subsequently been expunged from your record?  Yes  No

*Note: Answering "Yes" to the above questions does not constitute an automatic bar to employment. Each case will be determined on its own merits.*

If you answered yes to [a] and/or [b] above, please explain fully, including disposition: \_\_\_\_\_

## REFERENCES

Providing professional references is the applicant's responsibility. ECT will not consider for employment any person who does not provide the full name and current contact information of at least three professional references who can and will discuss the applicant's career accomplishments and suitability for the position sought.

Please list three professional references who have known you for a year or more:

Name	Business Name	Phone Number	Address	City, State
1. _____				
2. _____				
3. _____				

## AUTHORIZATION & RELEASE FOR REFERENCES

I understand that providing acceptable references is my responsibility and that ECT may refuse to employ me if I do not provide current contact information for a suitable number of professional references who are both qualified to and willing to discuss with ECT my experience and my qualifications for the position I am seeking.

I authorize each of the professional references provided by me, as well as any custodian of records at any former employer to release any information regarding my employment, experience and qualifications for the position being sought with ECT. I hereby fully waive any rights or claims I have or may have against the aforementioned, and release them from any and all liability, claims or damages that may directly or indirectly result from the disclosure or release of such information, whether or not that information is favorable or unfavorable to me.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## ACKNOWLEDGMENTS

I hereby certify that everything on this application and its accompanying documents [Background Inquiry Release, Authorization for Drug Test, Supplement Employment History (if applicable) and the Voluntary Equal Employment Opportunity Form (if voluntarily completed)], is true and complete and that I have omitted no material facts or information. I understand that regardless of when discovered, any misrepresentation, falsification or material omission of information on this Employment Application and its accompanying documents or in the interview process, will result in no offer of employment being extended to me, or an extended offer being rescinded or in the termination of my employment with ECT, depending upon when the misrepresentation, falsification or material omission is discovered.

I understand that any offer of employment from ECT is conditional upon my passing a drug test.

I understand that once employed by ECT I will be required to immediately offer satisfactory documentary proof of my right to reside and work in the United States.

I understand that once employed by ECT, I will be required to immediately produce an original Social Security Card.

I understand that my employment with ECT will at all times be an "at will" relationship which can be ended by me or by ECT, and any time, for any reason or for no reason, with or without notice.

I understand that only the President & Chief Executive Officer of ECT can modify the "at will" nature of my employment relationship with ECT and that such modification must be in writing and signed by the President & Chief Executive Officer of ECT to have any force or effect.

I understand that I will be considered for employment with ECT only if this application and the required accompanying documents are filled out in their entirety. I also understand that this application will be active for a maximum of thirty (30) days. If I wish to be considered for employment after that time, I must reapply.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date