

## TEMPORARY APPLICATION

### PERSONAL

REV'D 1/17

Last Name: _____		Address: _____	
First Name: _____ M.I. _____		City: _____ State: _____ Zip: _____	
		How long have you lived in CT? _____	
Home Phone: (     ) Cell Phone: (     ) Alternate Phone: (     )		Social Security #:  E-mail Address:	Are you 18 years or older?  <b>YES     NO</b>
Are you legally eligible for employment in the USA?  <b>YES     NO</b>		Emergency Contact Name:  Phone:	Hourly Rate Required:  \$
Available to Start:  Days Available: <b>M   TU   W   TH   F   SA   SU</b>  Shift Available: <b>1<sup>st</sup>        2<sup>nd</sup>        3<sup>rd</sup></b>  Can you work on holidays? <b>YES     NO</b>		Transportation how will you travel to work: <b>Own Car     Bus line     Access to Car     Get Ride     </b>  Distance you are willing to travel? <b># of Miles                      # of Minutes/Hours                      </b>	
Three primary administrative skills: 1) _____ 2) _____ 3) _____		Other employment agencies worked for:  How did you hear about Reitman?	Three primary industrial skills: 1) _____ 2) _____ 3) _____

### EDUCATION

High School:		Did you graduate? <b>YES   NO</b> Year: _____	
		GED? <b>YES   NO</b> Year: _____	
College or University Attended:		From:                      To:	
Major:	Minor:	GPA:	Degree/Certificate:

### EMPLOYMENT HISTORY (Most Recent First)

Dates: From: To:	Employer:	Address:	Phone:
Your Job Title:	Supervisor's Name & Title:	Hourly Salary:	Reason for Leaving:
Duties & Responsibilities:			

Dates: From: To:	Employer:	Address:	Phone:
Your Job Title:	Supervisor's Name & Title:	Hourly Salary:	Reason for Leaving:
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Dates: From: To:	Employer:	Address:	Phone:
Your Job Title:	Supervisor's Name & Title:	Hourly Salary:	Reason for Leaving:
Duties & Responsibilities:			

**CONTINUED OTHER SIDE**

**CANDIDATE HIRE AGREEMENT (Please Read Carefully):**

Reitman Personnel (RP) is an Equal Opportunity and Drug Free Employer. Your signature indicates your understanding and agreement to the following:

- Your employment as a temporary employee is at will.
- Once I have accepted an assignment, I will make every effort to complete it.
- I must call RP within 3 days upon completion of my assignment with my availability; failure to do so will be considered my official resignation. I must continue to notify RP of my availability to remain an active candidate.
- I agree to RP's Temp to Hire policy. If I accept employment without RP's written authorization, I will pay a \$1,000 placement fee and any attorney fees required for collection. For a period of 6 months following the conclusion of my assignment, I will not accept employment at any RP client company where I have been assigned without written authorization.
- In the event a client company's name is divulged to me, I will not accept employment at that client company for a period of 6 months following the date of that discussion (1 year for permanent placement applicants) or I will pay a \$1,000 placement fee and any attorney fees required for collection.
- I authorize RP to collect and release employment references, application information, drug/alcohol tests, criminal background, and credit checks to its clients when required for placement.
- In the event I am injured on the job, my application authorizes RP to provide all relevant injury and employment information including wages, and lost time to their health care provider and insurance carriers and I authorize them to provide treatment and share all medical information.

I received a copy of Reitman's Orientation Booklet. I understand that this agreement and the orientation booklet is my contract with RP and my signature confirms my agreement to all terms and conditions therein, including release of job related application and medical records. The information I have provided is correct to the best of my knowledge. I understand that providing false information will disqualify me for employment. I understand withholding relevant safety information may disqualify me for employment and may void workers compensation coverage.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

**FOR OFFICE USE ONLY**

<b>Tax Forms Completed:</b> I-9 ____ Yes ____ No    W-4 ____ Yes ____ No Need: _____	<b>I.D. Requirements Met:</b> ____ Yes ____ No Need: _____	<b>Checked By:</b>  
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<b>Gen Clerical:</b> _____% ____ of ____	<b>Typing:</b> _____ WPM _____ Errors	<b>Data Entry:</b> _____% _____ Mistakes _____ # Strokes _____ Time Taken	<b>Excel:</b> _____% ____ of ____	<b>Word:</b> _____% ____ of ____	<b>Misc Testing</b>
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MMA	MA	PA	I	Interviewed By:	3 PRIMARY SKILLS
					1) 2) 3)

Can we send you to a client who requires a criminal check YES/NO? PLEASE EXPLAIN: \_\_\_\_\_

MISCELLANEOUS NOTES/SAFETY ISSUES/ACCOMODATIONS REQUIRED: