



## DISPENSER INSTALLATION SPECIALISTS, LLC EMPLOYMENT APPLICATION

® Please type or print legibly using a blue or black pen. Answer all question completely. Write N/A if not applicable.

APPLICANT INFORMATION					
LAST NAME		FIRST NAME		M.I.	DATE
STREET ADDRESS					APT/UNIT #
CITY		STATE	ZIP	TELEPHONE NUMBER	
SOCIAL SECURITY NUMBER		DRIVER'S LICENSE STATE/NUMBER		EMAIL (OPTIONAL)	
EMPLOYMENT QUESTIONS					
AVAILABLE START DATE	ARE YOU AVAIL- ABLE TO WORK FULL-TIME?	Yes No	ARE YOU AT LEAST 18 YEARS OF AGE?	Yes No	ARE YOU LEGALLY ENTITLED TO WORK IN THE UNITED STATES OF AMERICA? U.S. law requires that if hired, you must furnish proof of your eligibility to work in the U.S. Yes No
Yes	No	Do you have experience using power tools?			
Yes	No	Do you have experience in the construction field?			
Yes	No	Do you read, write and speak the English language?			
Yes	No	Are you fluent in any other languages other than English? If yes, what language(s)?			
Yes	No	Do you have personal computer skills?			
Yes	No	Do you have regular daily access to a personal computer?			
Yes	No	Do you have regular daily access to a passenger motor vehicle?			
Yes	No	If yes to the previous question, are you covered by valid insurance on the vehicle?			
Yes	No	Do you have a valid, unexpired driver's license?			
Yes	No	Are you able and willing to work a flexible schedule including working on weekends and holidays?			
Yes	No	Are you able and willing to travel for work on an as needed basis?			
BACKGROUND INFORMATION					
Yes	No	Do you agree to submit to a drug screening as a condition for employment or for continued employment if hired?			
Yes	No	Do you agree to authorize a background check?			
Yes	No	Have you ever been convicted of, or have you plead guilty or no contest to, a misdemeanor or felony offense? <i>If yes, explain.</i>			
DESCRIPTION (please include date)					
EDUCATION <i>List all high school, college, university or technical training.</i>					
HIGH SCHOOL		DID YOU GRADUATE?		IF NO, DID YOU GET A GED?	
		Yes No		Yes No	
ADDRESS					
COLLEGE		YEARS COMPLETED		DID YOU GRADUATE?	
				Yes No	
ADDRESS					
OTHER		YEARS COMPLETED		DID YOU GRADUATE?	
				Yes No	
ADDRESS					

**PREVIOUS EMPLOYMENT** *List all employment for the past 5 years, starting with your most recent employer. For any unemployed or self-employed periods show dates. Complete your employment record as fully as possible.*

COMPANY		SUPERVISOR
ADDRESS		TELEPHONE NUMBER
JOB TITLE	STARTING SALARY	ENDING SALARY
JOB RESPONSIBILITIES		
STARTING DATE (MM/DD/YY)	ENDING DATE (MM/DD/YY)	REASON FOR LEAVING
Yes	No	May we contact your previous supervisor for a reference?

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ADDRESS		TELEPHONE NUMBER
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JOB RESPONSIBILITIES		
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**ADDRESS HISTORY** *List previous address.*

ADDRESS (street, city & state)	DATES OF RESIDENCE
ADDRESS (street, city & state)	DATES OF RESIDENCE
ADDRESS (street, city & state)	DATES OF RESIDENCE

<b>REFERENCES</b> <i>Please list two persons familiar with either your work or academic background.</i>	
(1) FULL NAME	RELATIONSHIP
COMPANY	TELEPHONE NUMBER
ADDRESS	
(2) FULL NAME	RELATIONSHIP
COMPANY	TELEPHONE NUMBER
ADDRESS	
<b>MILITARY SERVICE</b>	
BRANCH	DATES OF SERVICE
RANK AT DISCHARGE	TYPE OF DISCHARGE
Yes      No	Are you currently serving in a branch of the United States Armed Forces?
<b>HOW DID YOU HEAR ABOUT DIS?</b> <i>Please select all that apply</i>	
Company Website (www.dispenserinstall.com)	
Job Posting	
DIS Employee	
Professional Organization	
Social Media	
Other	
<b>IF YOU SELECTED OTHER PLEASE EXPLAIN</b>	
<b>APPLICATION CERTIFICATION</b> <i>Please read the following statements carefully and indicate your understanding and acceptance by signing in the space provided.</i>	
<p>I certify that all the information I have provided in connection with my application for employment, whether on this document or not, is true and complete.</p> <p>I understand that any misstatement, falsification or omission of information on this document or in any interviews may be grounds for refusal to hire or, if hired, termination</p> <p>I understand that as a condition of employment, I will be required to provide legal proof of authorization to work in the United States of America.</p> <p>I authorize any of the persons or organizations referenced in this application to give you and all information concerning my previous employment, education or any other information they may have, personal or otherwise, with regard to any subjects covered by this application. I release all such parties from all liability from any damages which my result from furnishing such information to you.</p> <p>I understand that my employment is contingent on passing a background check and drug test. I authorize Dispenser Installation Specialists, LLC to perform a background check and a drug test.</p> <p>I understand that Dispenser Installation Specialists, LLC is a drug-free workplace and as an employee I may be required to participate in their drug testing program as a condition of my continued employment.</p> <p>I understand that the submission of this application does not necessarily mean that I will be hired.</p> <p>I understand that if I am hired my employment is at will, and either I or Dispenser Installation Specialists, LLC may terminate my employment at any time, with or without notice or cause.</p>	
SIGNATURE	DATE
PRINTED NAME	