



(PLEASE PRINT AND COMPLETELY ANSWER ALL QUESTIONS)

Wind Capital Group subscribes to the principles of Equal Employment Opportunity. It is our policy to provide employment, compensation, and other benefits related to employment based on qualifications, without regard to race, color, religion, national origin, age, sex, veteran status, disability, or any other basis prohibited by federal, state or local law. In accordance with requirements of the Americans With Disabilities Act, it is our policy to provide reasonable accommodation upon request during the application process to eligible applicants in order that they may be given a full and fair opportunity to be considered for employment. As Equal Opportunity Employers, we intend to comply fully with applicable federal and State employment laws and the information requested on this application will only be used for purposes consistent with those laws. Applications are only accepted for positions currently available and will only be considered for thirty (30) days from today's date or until the position applied for is filled, whichever first occurs.

**POSITION APPLIED FOR:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PERSONAL DATA:**

Salary expectations: \_\_\_\_\_

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Social Security Number \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_

If you are under 18 years of age, please specify your age here \_\_\_\_\_.

This information will be used only for child labor law purposes.

Are there any days, shifts or hours you will not work? \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

Are you available for out of town work? \_\_\_\_\_

Will you work overtime, if required? \_\_\_\_\_

When will you be able to start work? \_\_\_\_\_

Have you taken any illegal drugs in the last 30 days? \_\_\_\_\_

Have you ever been a defendant in a civil action for an intentional tort (intentional commission of a wrongful act)? Yes  No

**Note:** Answering "yes" does not automatically exclude you from further consideration for the position.

If yes, include nature of the intentional tort and the disposition of the action: \_\_\_\_\_

How did you learn of our Company? \_\_\_\_\_

If referral, who were you referred by? \_\_\_\_\_

Have you ever applied or worked here before? Yes  No  if yes, provide dates: \_\_\_\_\_

Are you legally authorized to work in the United States? Yes  No

Will you now or in the future require sponsorship for employment visa status (e.g., H-1B visa status)?  
Yes  No

Note: The Federal Immigration and Reform and Control Act of 1986 requires that a DHS Employment Eligibility Verification "Form I-9" be completed for every new hire and that within 3 business days of beginning work every new hire must present to the employer documentation establishing his/her identity and authorization to work. This federal requirement must be satisfied as a condition of employment.

**DRIVING RECORD:**

(Answer only if driving is a requirement of the job for which you are applying)

Do you have a valid drivers license? Yes  No  State \_\_\_\_\_ License No.: \_\_\_\_\_

Have you had any tickets? Yes  No  If yes, please explain: \_\_\_\_\_

Has your license ever been suspended or revoked? Yes  No  If yes, please explain: \_\_\_\_\_

**RESIDENCES:**

(Please provide your addresses of residence for the past seven years beginning with the most recent address.)

Street Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip Code \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip Code \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip Code \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State/Zip Code \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

**EDUCATION:**

(May or may not be considered depending on job applied for.)

Describe any educational degrees, skills, training or experience you believe are relevant to the job applied for:

Name, City and State of Educational Institution	Graduated?		If no Degree, Credits earned	Type of Degree Received or Expected	Major	Minor	Grade Point Overall GPA
	Yes	No					
High School							
College or University							
Technical/ GED							
Licenses/ Certifications/Other							

**EMPLOYMENT HISTORY:**

(Please complete for all full-time or part-time employment beginning with most recent employer. You may include as part of your employment history any verified work performed on a volunteer basis.)

Company Name \_\_\_\_\_ Tel # \_\_\_\_\_  
Address \_\_\_\_\_ Dates Employed From \_\_\_\_ To \_\_\_\_  
Name of Supervisor \_\_\_\_\_ Rate of Pay Start \_\_\_\_\_ Last \_\_\_\_  
State job titles and describe job duties \_\_\_\_\_  
Reason For Leaving \_\_\_\_\_  
May we contact? Yes  No

Company Name \_\_\_\_\_ Tel # \_\_\_\_\_  
Address \_\_\_\_\_ Dates Employed From \_\_\_\_ To \_\_\_\_  
Name of Supervisor \_\_\_\_\_ Rate of Pay Start \_\_\_\_\_ Last \_\_\_\_  
State job titles and describe job duties \_\_\_\_\_  
Reason For Leaving \_\_\_\_\_  
May we contact? Yes  No

Company Name \_\_\_\_\_ Tel # \_\_\_\_\_  
Address \_\_\_\_\_ Dates Employed From \_\_\_\_ To \_\_\_\_  
Name of Supervisor \_\_\_\_\_ Rate of Pay Start \_\_\_\_\_ Last \_\_\_\_  
State job titles and describe job duties \_\_\_\_\_  
Reason For Leaving \_\_\_\_\_  
May we contact? Yes  No

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

Have you ever been discharged or forced to resign? Yes  No  If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

Did you receive any discipline in the last 12 months of active employment? Yes  No  If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

Have you signed any non-compete or non-solicit agreement with any other employer that might restrict you from working for this company? Yes  No  If yes, please explain: \_\_\_\_\_  
(You may be required to furnish a copy of the agreement)

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**MILITARY SERVICE:**

(Complete only if you served in the military)

Branch of Service: \_\_\_\_\_  
Number of Years/Months of Service: \_\_\_\_\_  
Rank at Discharge: \_\_\_\_\_ Date of Discharge: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_  
Describe any military skills, training or experience you believe are relevant to the job applied for: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## CRIMINAL RECORD INFORMATION:

All Applicants: You must answer all four questions below. When answering the following questions, you may exclude any records expunged, annulled, sealed, discharged, dismissed, erased under first-offender law or otherwise eradicated by statute or court order. You may also exclude a first conviction for any of the following misdemeanors; drunkenness, simple assault, speeding, minor traffic violations, affray or disturbance of the peace.

A criminal conviction will not necessarily be a bar to employment but will be considered in relation to specific job requirements.

1. Have you been convicted of a felony within the last seven years?

Yes  No  Date of Conviction: \_\_\_\_\_

2. Have you been convicted within the last seven years of misappropriation of funds, embezzlement, or similar for other dishonest conduct; or an offense involving the use of a weapon; for burglary, robbery, breaking and entering or theft; or physical assault or other violent crime?

Yes  No

3. Have you been convicted of or completed a period of incarceration within the past five years for any misdemeanor?

Yes  No

If the answer to the above question is "yes", please state whether you were convicted more than five years ago for any offense?

Yes  No

4. A criminal conviction will not necessarily be a bar to employment. To help us evaluate your application, please describe your criminal conviction(s) including penalty (ies) imposed, listing the nature of your offense(s), and your rehabilitation since the conviction(s). \_\_\_\_\_

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## APPLICANT'S ACKNOWLEDGMENT

I certify that the answers given herein are true and complete to the best of my knowledge. I understand that any misrepresentations, omissions of facts or incomplete answers in any application document may disqualify me from further consideration for employment. I further understand that, if employed, any misrepresentations or omissions of facts in any application document may be cause for my dismissal at any time without prior notice. I consent to and authorize Wind Capital Group to contact my former employers, references, and any and all other persons and organizations for information bearing upon my qualifications for employment. I further authorize the listed employers, schools and personal references to give Wind Capital Group (without further notice to me) any and all information about my previous employment and education, along with any other pertinent information they may have and hereby waive any actions which I may have against either party(ies) for providing a good faith reference.

**I EXPRESSLY AGREE AND UNDERSTAND THAT, IF EMPLOYED, MY EMPLOYMENT IS NOT FOR A SPECIFIC TERM, IS BASED ON MUTUAL CONSENT AND MAY BE TERMINATED BY ME OR MY EMPLOYER(S) WITH OR WITHOUT NOTICE OR CAUSE AT ANY TIME. I FURTHER UNDERSTAND THAT NO ORAL PROMISE, EMPLOYER(S) POLICY, CUSTOM, BUSINESS PRACTICE OR OTHER PROCEDURE (INCLUDING THE BASIC EMPLOYMENT POLICIES, PERSONNEL HANDBOOK OR ANY PERSONNEL MANUALS) CONSTITUTE AN EMPLOYMENT CONTRACT OR MODIFICATION OF THE AT-WILL EMPLOYMENT RELATIONSHIP BETWEEN ME AND THE EMPLOYER(S). I ALSO**

**UNDERSTAND THAT THIS ASPECT OF MY EMPLOYMENT MAY NOT CHANGE ABSENT AN INDIVIDUAL WRITTEN AGREEMENT SIGNED BY BOTH ME AND THE PRESIDENT OF WIND CAPITAL GROUP.**

I understand that applicants for certain positions may be required to qualify for employment based on additional employment criteria. For example, I may be required to take job-related tests; take a driver's examination; submit to a background investigation; take a pre-employment drug test. If I am offered employment or start work before any required test is completed, my employment is contingent on a satisfactory result on all required tests. I authorize Wind Capital Group to release the results of background checks (if any) and my pre-employment drug/alcohol test (if any), any information on this application and any relevant information about me to each other and to other Wind Capital Group clients for whom I have applied for employment, and release Wind Capital Group from any and all claims related to the lawful release of this information. I further authorize the release of any background check results of any drug/alcohol test to any state or federal authority requesting such information and in response to a valid subpoena or other legal document.

I acknowledge that this application will remain active for 30 days from this date. If I have not heard from Wind Capital Group at the conclusion of this 30 day period, it is my responsibility to complete a new application if I still wish to be considered for employment.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_