



APPLICATION FOR EMPLOYMENT

Please answer all the questions on this form to the best of your ability. If there is any question(s) which you do not feel you should have to answer you are under no obligation to provide the information. Your qualification will be carefully reviewed and you will be given thorough consideration for any position suitable in the company. If you are employed, this will become a part of your permanent personnel record. Keep this in mind as you fill it out. We appreciate your interest as shown by your filling out this application.

In consideration of my employment I agree to follow the rules, regulations and policies of Foresight Group. I understand that Foresight Group reserves the right to modify, suspend, terminate, or change any or all of its rules, regulations, and policies which may from time to time be in effect, in whole or in part, at any time and with or without notice.

I also understand that my employment with Foresight Group is at-will and may be terminated by me or Foresight Group at any time, with or without cause or notice. I understand that only the President of Foresight Group has the authority to enter into an Agreement with me for employment of a specified duration, and that such Agreement must in writing and signed to be binding. I understand that no other representative of Foresight Group has the authority to enter in an agreement with me for employment of a specified duration. I understand that all claims arising out of employment or the termination of employment must be filed within 180 days of the event giving rise to the claims.

(PLEASE PRINT)

GENERAL INFORMATION

Position applied for _____ Salary Expected _____

Full Name _____

Address _____

How long have you lived there? _____

How long have you been a resident of this state or city? _____

Telephone: Home _____ Work _____

Social Security Number _____ Are you 18 years or older? _____

Do you have any friends or relatives working here? Name: _____

Have you ever been convicted of a crime? If so, when, where, and nature of crime or offense: _____

Are there any felony charges pending against you? If yes, describe: _____

MEDICAL INFORMATION

Your job at Foresight Group may require lifting and moving of cartons, to a lesser or greater degree. There you may be required to take a physical from a company chosen doctor. Do you have an objection to taking a physical? _____

Can you perform the duties of the job in which you wish to be employed, with or without accommodation?

Notify in Case of Emergency:

Name: _____ Telephone: _____

Address: _____

REFERENCES

Give name, address and telephone number of three references who are not related to you and are not previous employers:

NAME	ADDRESS	TELEPHONE NUMBER

EDUCATION

SCHOOL'S NAME & LOCATION	DATES	GRADE PT.	GRADUATE?	DEGREE
High Sch:				
College:				
Graduate:				
Trade:				
Other:				

Extra Curricular Activities; Memberships; Offices Held: _____

EMPLOYMENT EXPERIENCE

(Continued)

May we contact your present employer? _____ Previous Employers? _____

Note exceptions and reasons for not contacting: _____

Why do you want a job with this company? _____

I hereby affirm and declare that all the foregoing statements are true and correct, and that I have not knowingly withheld any facts that would, if disclosed, affect my application unfavorably, and I hereby authorize the company to conduct any investigation it deems necessary on this application. I also hereby authorize this company to release such information together with their opinion on these matters without any liability for any damage whatsoever caused either directly or indirectly by giving or receiving this information or opinions. I authorize my former and present employers and personal references to give any information they may have concerning my character, health and employment record. It is understood that false statements on this application may be considered as sufficient cause for rejection of this application, or dismissal, if already employed by the company.

Dated: _____ Applicant Signature: _____

Dated: _____ Witness Signature: _____

Applicant - Do Not Write Below This Line
FOR INTERVIEWER'S USE ONLY

INTERVIEWER	DATE	COMMENTS