



**TECHFORCE TELECOM INC.**  
**206 -26<sup>TH</sup> Street**  
**Catlettsburg, KY 41129**  
**606-739-9726**  
**800-943-1165**

**APPLICATION FOR EMPLOYMENT**

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose or limiting or excluding any applicant from consideration fro employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

Applicant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Email: \_\_\_\_\_ Type of employment desired:  Full-time  Part-time  Temporary

Position(s) being applied for or type of work desired: \_\_\_\_\_

Date you will be available for work: \_\_\_\_\_

Are you able to meet the attendance requirements?  Yes  No

Do you have any objection to working overtime, if necessary?  Yes  No

Can you travel if required by this position?  Yes  No

Have you ever been previously employed by this Organization?  Yes  No

Can you submit proof of legal employment authorization and identity?  Yes  No

If you are under the age of 18, can you furnish a work permit, if required?  Yes  No

Have you ever been convicted of any crime in the last 7 years?  Yes  No

If yes, please explain: (Please note that a conviction will not automatically bar employment) \_\_\_\_\_

Driver's License Number (if driving is an essential job duty): \_\_\_\_\_

How were you referred to us? \_\_\_\_\_

**Employment History (if you have a complete resume with the following information, please attached and skip this section)**

Please provide all employment information for your past four (4) employers starting with the most recent.

Employer: \_\_\_\_\_

Position held: \_\_\_\_\_

Address: \_\_\_\_\_

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

Immediate supervisor and title: \_\_\_\_\_

Dates employed: From \_\_\_\_\_ to \_\_\_\_\_

Salary: \_\_\_\_\_ Job Summary: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Employer: \_\_\_\_\_

Position held: \_\_\_\_\_

Address: \_\_\_\_\_

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

Immediate supervisor and title: \_\_\_\_\_

Dates employed: From \_\_\_\_\_ to \_\_\_\_\_

Salary: \_\_\_\_\_ Job Summary: \_\_\_\_\_

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Reason for leaving: \_\_\_\_\_

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Employer: \_\_\_\_\_

Position held: \_\_\_\_\_

Address: \_\_\_\_\_

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

Immediate supervisor and title: \_\_\_\_\_

Dates employed: From \_\_\_\_\_ to \_\_\_\_\_

Salary: \_\_\_\_\_ Job Summary: \_\_\_\_\_

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Reason for leaving: \_\_\_\_\_

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Employer: \_\_\_\_\_

Position held: \_\_\_\_\_

Address: \_\_\_\_\_

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

Immediate supervisor and title: \_\_\_\_\_

Dates employed: From \_\_\_\_\_ to \_\_\_\_\_

Salary: \_\_\_\_\_ Job Summary: \_\_\_\_\_

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Reason for leaving: \_\_\_\_\_

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**Other Skills and Qualifications**

Summarize and job-related training, skills, licenses, certificates, and/or qualifications:

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**Educational History**

List school name and location, years completed, course of study, and any degrees earned:

High School: \_\_\_\_\_

College: \_\_\_\_\_

Technical Training: \_\_\_\_\_

Other: \_\_\_\_\_

**References**

List three (3) references by name, telephone numbers, and years known (do not include relatives or past or present employers):

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I hereby authorize the potential employer to contact, obtain, and verify the accuracy of information contained in this application from all previous employers, educational institutions, and references. I also hereby release from liability the potential employer and its representative for seek, gather, and using such information to make employment decisions and all other persons or organizations for providing such information.

I understand that any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate termination of employment if I am employed, whenever it may be discovered.

If I am employed, I acknowledge that there is no specified length of employment and that this application does not constitute an agreement or contract for employment. Accordingly, either the employer or I can terminate the relationship at will, with or without cause, at any time, so long as there is no violation of applicable federal or state law.

I understand that it is the policy of this organization not to refuse to hire or otherwise discriminate against a qualified individual with a disability because of that person's need for a reasonable accommodation as required by the ADA.

I also understand that if I am employed, I will be required to provide satisfactory proof of identity and legal work authorization within three (3) days of being hired. Failure to submit such proof within the required time shall result in immediate termination of employment.

I represent and warrant that I have read and fully understand the foregoing, and that I seek employment under these conditions.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_