

# THE DUFF COMPANY

## Application For Employment

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The Duff Company is an equal opportunity employer. It is our policy to provide equal opportunities in employment, promotion, wages, benefits and all other privileges, terms and conditions of employment to qualified persons without regard to race, religion, color, creed, ancestry, national origin, sex, age, veteran's status or disability which does not interfere with the ability to perform the essential functions of an employee's job with or without reasonable accommodation.

### PERSONAL INFORMATION

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

Social Security \_\_\_\_\_ Date \_\_\_\_\_

Present Address \_\_\_\_\_  
*Street*
*City*
*State*
*Zip*

Phone \_\_\_\_\_ Number of years at this address \_\_\_\_\_

Previous Address \_\_\_\_\_  
*Street*
*City*
*State*
*Zip*

Phone \_\_\_\_\_ Number of years at this address \_\_\_\_\_

### EMPLOYMENT DESIRED

Position \_\_\_\_\_ Expected weekly pay \_\_\_\_\_

Are you employed now? \_\_\_\_\_ If so, may we inquire of your present employer? \_\_\_\_\_

Have you applied for a job at  
 The Duff Company before? \_\_\_\_\_ When? \_\_\_\_\_

### EDUCATION

	Name & Location of School	No. of Yrs. Attended	Did You Graduate?	Major Course of Study
High School or G.E.D.				
College				
Trade, Business, or Correspondence School				

Please describe additional skills, training, or abilities you would like to have us consider in evaluating your qualifications: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

FORMER EMPLOYERS (List below last ten years of employment, starting with current employer)

Add additional pages if necessary.

Company/Firm: _____ Address: _____ Telephone: _____ Supervisor: _____	(Mo./Yr.) From: _____ To: _____ Rate of Pay <u>Start</u> <u>Finish</u>	Job Title: _____ Duties: _____ Reason for Leaving: _____
Company/Firm: _____ Address: _____ Telephone: _____ Supervisor: _____	(Mo./Yr.) From: _____ To: _____ Rate of Pay <u>Start</u> <u>Finish</u>	Job Title: _____ Duties: _____ Reason for Leaving: _____
Company/Firm: _____ Address: _____ Telephone: _____ Supervisor: _____	(Mo./Yr.) From: _____ To: _____ Rate of Pay <u>Start</u> <u>Finish</u>	Job Title: _____ Duties: _____ Reason for Leaving: _____
Company/Firm: _____ Address: _____ Telephone: _____ Supervisor: _____	(Mo./Yr.) From: _____ To: _____ Rate of Pay <u>Start</u> <u>Finish</u>	Job Title: _____ Duties: _____ Reason for Leaving: _____
Company/Firm: _____ Address: _____ Telephone: _____ Supervisor: _____	(Mo./Yr.) From: _____ To: _____ Rate of Pay <u>Start</u> <u>Finish</u>	Job Title: _____ Duties: _____ Reason for Leaving: _____

REFERENCES (Give the names of three persons not related to you whom you have known at least one year)

Name	Address	Telephone	Occupation	Years Acquainted
(1)				
(2)				
(3)				

Are you able, with or without accommodation, to perform all of the essential functions of the job for which you are applying?

Yes \_\_\_\_\_ No \_\_\_\_\_

Are there any functions of the job for which you are applying that you cannot perform with or without reasonable accommodation? If so, please describe those functions. \_\_\_\_\_

\_\_\_\_\_

Can you meet the attendance requirements of this position?

Yes \_\_\_\_\_ No \_\_\_\_\_

U. S. MILITARY SERVICE

Dates of Service: From \_\_\_\_\_ To \_\_\_\_\_ Branch \_\_\_\_\_

Rank and Principal Duties: \_\_\_\_\_

\_\_\_\_\_

Type of Discharge: \_\_\_\_\_

OTHER

Have you ever been convicted of a felony or misdemeanor? Yes \_\_\_\_\_ No \_\_\_\_\_

*Conviction will not necessarily disqualify an applicant from employment.*

If "yes" please explain \_\_\_\_\_

\_\_\_\_\_

I certify that the information contained in this application is correct to the best of my knowledge and understand that any falsification or material omission is grounds for the refusal to hire me, or if I am hired, dismissal from employment. I authorize THE DUFF COMPANY to make a thorough investigation of my previous employment, criminal history, education, references and all other information provided on this application.

I authorize any of the persons or organizations referenced in this application to release any pertinent information they may have with regard to any of the subjects covered by this application, and I release from all liability all parties supplying such information. I release and hold harmless THE DUFF COMPANY from and against any and all liability or claims for damages that may result from this investigation or the release, disclosure and use of this information.

**I understand that nothing contained in this employment application or granting of an interview is intended to create, nor does it create, and employment contract between THE DUFF COMPANY and myself. I understand that no representative of THE DUFF COMPANY, other than the President, has the authority to enter into any agreement for employment for any specified period of time. I further understand that if I am hired by THE DUFF COMPANY, I will be employed at-will, which means that either THE DUFF COMPANY or I may terminate the employment relationship at any time, with or without prior notice, and with or without cause or reason.**

If employed, I agree to abide by the rules and policies of THE DUFF COMPANY.

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