



**ATG.USA, LLC DBA "Applied Technologies Group"**

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**Application for Employment**

Conditions of employment are stated at the end of this form. Please read carefully before you sign. Application must be completed even if submitting a résumé.

**Personal Information**

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

Address: \_\_\_\_\_ e-mail: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home phone #: \_\_\_\_\_ Cell phone #: \_\_\_\_\_

Are you legally qualified to work in the United States:  Yes  No (Proof of citizenship or immigration status may be required upon employment.)

Have you been convicted of a crime in the last 10 years (excluding a minor traffic violation)?  Yes  No

If yes, briefly explain. \_\_\_\_\_

(A conviction will not necessarily disqualify you for employment. Rather, such factors as age and date of conviction, seriousness and nature of crime, and rehabilitation will be considered.)

Are you at least 18 years of age?  Yes  No (If not, you may be required to provide authorization to work.)

How did you hear about us? \_\_\_\_\_ Referred by \_\_\_\_\_

Position applied for: \_\_\_\_\_ Date available for work: \_\_\_\_\_

Rate of pay desired: \_\_\_\_\_ Hours desired:  Full-time  Part-time  Temporary

**Education**

	Name and Location	Last Year Attended	Subject/Major	Did You Graduate?
High School		9 10 11 12		<input type="checkbox"/> Yes <input type="checkbox"/> No
College		1 2 3 4		<input type="checkbox"/> Yes <input type="checkbox"/> No
Graduate School		1 2 3 4		<input type="checkbox"/> Yes <input type="checkbox"/> No
Trade School		1 2 3 4		<input type="checkbox"/> Yes <input type="checkbox"/> No
Other Training		1 2 3 4		<input type="checkbox"/> Yes <input type="checkbox"/> No

A copy of your degree or diploma as well as an official transcript will be required if you are hired. Failure to provide these documents within 30 days will result in termination.

Please list any additional Educational/Specialized Training you have received:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Employment History**

Please list your prior work experience starting with your most recent place of employment.

Current or last employer \_\_\_\_\_ From (month/year) \_\_\_\_\_ To (month/year) \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Position held \_\_\_\_\_ Wage \_\_\_\_\_  Full-time  Part-time  
 Contact person \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_ May we contact?  Yes  No

Current or last employer \_\_\_\_\_ From (month/year) \_\_\_\_\_ To (month/year) \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Position held \_\_\_\_\_ Wage \_\_\_\_\_  Full-time  Part-time  
 Contact person \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_ May we contact?  Yes  No

Current or last employer \_\_\_\_\_ From (month/year) \_\_\_\_\_ To (month/year) \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Position held \_\_\_\_\_ Wage \_\_\_\_\_  Full-time  Part-time  
 Contact person \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_  
 Reason for leaving \_\_\_\_\_ May we contact?  Yes  No

Explain any gaps in work history \_\_\_\_\_

Have you ever been discharged or asked to resign from a job?  Yes  No If yes, explain \_\_\_\_\_

**Personal References (Other than previously listed)**

List three individuals not related to you whom you have known for at least one year. We will assume we have your permission to contact these people unless you indicate to the contrary.

Name	Address	Phone #	Occupation

**APPLICANT’S STATEMENT:**

**By submitting this application, I agree to the following:**

I hereby certify that I am a genuine applicant for employment, that this application is being submitted solely for the purpose of seeking employment, and that the facts set forth in the above employment application are true and complete to the best of my knowledge. I agree to furnish such additional information and complete such examinations as may be required to complete my employment file.

I authorize ATG.USA, LLC and/or its agents to contact any and all references, corporations, former employers, credit agencies, educational institutions, law enforcement agencies, city, state, county, and federal courts, military services to release information about my background including, but not limited to, information about employment, education, consumer credit history, driving record, criminal record and general public records history to ATG.USA, LLC or its agents. I release employers and other persons named herein from all liability for any damages on account of furnishing such information.

I understand that I may be asked to demonstrate that I am capable of performing tasks which are pertinent to the job. I also understand that if offered a job, it may be conditioned on the results of a physical examination and a drug test.

I further understand that neither the policies, rules, regulations of employment, nor anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the employer may terminate my employment at any time with or without notice or cause.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

Thank you for your interest in being employed with Applied Technologies Group. Upon review of completed applications a representative of the company will schedule interviews with applicants who meet the initial requirements, as evidenced by the information provided herein.

ATG.USA considers all applications without regard to an applicant’s race, color, creed, religion, age, gender, national origin, pregnancy, veteran status and/or disability or other legally protected class.

Applied Technologies Group is an “AT-WILL” employer. The “AT-WILL” employment relationship affords the employee the right to resign for any reason. Likewise, the employer may terminate the relationship at any time, with or without cause and with or without notice. The “AT-WILL” employment relationship may not be altered by any written document or by verbal agreement, unless such alteration is specifically acknowledged in writing and signed by an authorized executive of the company.

**I have read and understood the above terms and conditions and agree to them by submitting this application.**

**OFFICE USE ONLY:**

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Interview Scheduled: Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_