

EMPLOYMENT APPLICATION

Applicants are considered for all positions without regard to race, color, religion, sex, sexual orientation, gender, sexual/gender identity, national origin, age, military or veteran status, disability, pregnancy or any other basis prohibited by the law. We are an Equal Opportunity Employer.

Personal Background (Please Print Clearly)

Legal Name (First, Middle, Last) _____

Other Name Formally Used _____

Date last used: _____

Month _____

Year _____

Other Name Formally Used _____

Date last used: _____

Month _____

Year _____

Current Address _____

City _____

County _____

State _____

Zip code _____

Home Telephone Number / Cell Phone Number _____

Email Address _____

Employment Desired

Position applied for _____

Date Available: _____

Salary Desired: _____

Are you presently employed? Yes No

Yes No

Are you over the age of 18? Yes No

Yes No

Are you lawfully authorized to work in the United States without restriction? Yes No

Yes No

Can you, prior to employment, provide verification of your legal right to work in the United States? Yes No

Yes No

Do you speak, read or write a language other than English? Yes No

Yes No

If yes, please specify: _____

Can you and are you willing to travel if your job requires it? Yes No

Yes No

If employment is offered, do you intend to have any type of secondary employment or self-employment? Yes No

Yes No

If required, would you be willing to work (please check one in each category)

Overtime Yes No

Holidays Yes No

Yes No

Saturdays/Sundays Yes No

Yes No

Indicate the days or nights you are not available to work, if any _____

Have you ever applied to this company or any of its affiliates? Yes No

Yes No

If yes, when? _____

Which affiliate(s) or department/property? _____

Have you ever employed by this company or any of its affiliates? Yes No

Yes No

If yes, when? _____

Which affiliate(s) or department/property? _____

Do you have any relatives employed by this company? Yes No

Yes No

If yes, who and what location? _____

Referral Source

How did you learn about our organization? Walk in Employee Referral, please list name(s): _____

Agency, Please list agency _____

School, Please specify _____

Internet, Please specify site _____

Newspaper or other print ad, please specify _____

Job Fair, Please specify _____

Other, Please specify _____

Driving Record

Do you have a valid unexpired license to drive a vehicle? Yes No

Yes No

Has your license been revoked or suspended during the past five years? Yes No

Yes No

If yes, Please explain _____

Driver's License Number _____

Issuing State _____

Expiration Date _____

Name appears on driver's license _____

Class of License _____

Education and Training

Indicate highest level of education completed

High School <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Technical School <input type="checkbox"/> 1 <input type="checkbox"/> 2	College/University <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	Graduate School <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3		
Name of School/College	Location/ City/State	Course Study	Years Completed	Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

List additional Education, vocation, trade, and/or professional information and/or certifications and/or licenses: _____

Computer Skills (please list software) _____

Other machines, trades, special skills or qualifications _____

Residence History

List all cities/countries where you have lived in the last seven years. List most recent city/county first. (Use an additional sheet if necessary)

City	County	State	From(Month/Year)	To (Month/Year)
City	County	State	From(Month/Year)	To (Month/Year)
City	County	State	From(Month/Year)	To (Month/Year)

Criminal Record

Have you ever been convicted of a felony, misdemeanor or crime of any kind? For purposes of this question, a conviction includes a plea, verdict or finding of guilt regardless of whether any sentence is imposed*. Yes No

Have you ever been convicted of driving under the influence of alcohol or drugs? For purposes of this question, a conviction includes plea, verdict or finding of guilt regardless of whether any sentence is imposed. Yes No

If yes to any of the above, please complete the boxes below and indicate whether felony or misdemeanor. Convictions will not necessarily disqualify an applicant for employment.

Date	Location, City/State	Charge	Action Taken

*You may exclude information regarding any conviction for which the record has been judicially ordered sealed, expunged or statutorily eradicated

MASSACHUSETTS APPLICANTS ONLY: You are not required to disclose a first conviction for any of the following misdemeanors: Speeding, minor traffic violations, affray, drunkenness, simple assaults or disturbances of the peace: or a conviction for any misdemeanor more than five years old (unless you have been convicted of any other offense within the last five years). An applicant for employment with a sealed record on file with the commissioner of probation may answer "no record" with respect to an inquiry herein relative to prior arrests, criminal court appearances or convictions. An applicant for employment with a sealed record on file with the commissioner of probation may answer "no record" with respect to an inquiry herein relative to prior events or criminal court appearances. In addition, any applicant for employment may answer "no record" with respect to an inquiry relative to prior arrests, court appearances, and adjudications in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court for criminal prosecution.

CALIFORNIA APPLICANTS ONLY: You may exclude information regarding any conviction that is more than two years old for a violation of California Health and Safety Code Sections 11357, 11360, 11364 or 11550 (or predecessor statutes) as they relate to marijuana.

Illegal Use of Drugs

Do you currently engage in the illegal use of drugs (for example, marijuana, cocaine, heroin, crack, speed LSD, etc.)? Yes No

Are you willing to be tested for the illegal use of drugs? Yes No

Employment History

List most recent position first. Although some of the information requested may be on your resume, please provide all employment history. (Use an additional sheet if necessary) Attach your resume to this application. You may include any verified work which you have performed as a volunteer.

Name of Company	_____		Company Telephone Number	_____	
Street Address	_____		City/State	_____	
Type of Business	_____		Exact Title/Position	_____	
Employment Dates	From: _____	To: _____	Base Salary:	Start: _____	End: _____
Other Compensation	_____		Supervisor Name	_____	
Supervisor's Position	_____		May we contact?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Reason for leaving	_____				
Description of duties, responsibilities and accomplishments	_____				

Name of Company	_____		Company Telephone Number	_____	
Street Address	_____		City/State	_____	
Type of Business	_____		Exact Title/Position	_____	
Employment Dates	From: _____	To: _____	Base Salary:	Start: _____	End: _____
Other Compensation	_____		Supervisor Name	_____	
Supervisor's Position	_____		May we contact?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Reason for leaving	_____				
Description of duties, responsibilities and accomplishments	_____				

Name of Company	_____		Company Telephone Number	_____	
Street Address	_____		City/State	_____	
Type of Business	_____		Exact Title/Position	_____	
Employment Dates	From: _____	To: _____	Base Salary:	Start: _____	End: _____
Other Compensation	_____		Supervisor Name	_____	
Supervisor's Position	_____		May we contact?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Reason for leaving	_____				
Description of duties, responsibilities and accomplishments	_____				

Professional References

If not previously employed, list personal references, other than relatives. If you have volunteer work experience, list the appropriate person to contact as a reference.

Name _____ Title _____
Company _____ Business Address _____
Business Phone _____ Relationship _____

Name _____ Title _____
Company _____ Business Address _____
Business Phone _____ Relationship _____

Name _____ Title _____
Company _____ Business Address _____
Business Phone _____ Relationship _____

Have you ever been terminated from employment or asked to resign by an employer? Yes No

If yes, Please explain _____

Please read carefully before signing.

This is an equal opportunity employer. I understand that no question being asked as part of my consideration for employment is intended to be unlawful.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation by the Employer to hire me. If I am hired, I understand that either the employer or I can terminate my employment at any time and for any reason. No one other than the President of the Employer is authorized to make an exception to the at-will employment relationship and any such exception must be in writing signed by the employee and the President.

All of the information I have given to the employer in considering me for employment is correct. No other information has been concealed. I understand that the employer may decide to conduct a drug screening, motor vehicle record searches and criminal background checks which formally may be considered a "consumer report" or an "investigative consumer report". I authorized to the fullest extent permitted by law, any such drug screening, Motor Vehicle Record search and / or criminal background check as well as the investigation of all other matters concerning my consideration for employment. I understand that all offers of employment are contingent upon the receipt of a favorable result of any such drug screening, motor vehicle record search, criminal background check and other investigated matter. I understand that if the Employer hires me, it may request a consumer report or an investigative consumer report about me for employment-related purposes during the course of my employment. The scope of this investigation will be the same as the scope of pre-employment investigation and the nature of such an investigation will be my continuing suitability for employment or whether I possess the minimum qualifications necessary for promotion or transfer to another position. I understand that my consent will apply throughout my employment. I waive any right, to the extent permitted by law to further prior notice and authorize the Employer to conduct a screening, search, background check or investigation directly or through its agents, and further authorize my former employers, references, and acquaintances to give any such information they may have regarding me. I release and indemnify this Employer, as well as any parties from whom information is obtained from any liability whatsoever resulting from the drug screening, motor vehicle records search, criminal background check or any other investigation and release of this information. If any information I have given to the employer is untrue or misleading, if I have concealed any information, if I have failed to fully complete this application, or if adverse information is discovered through the investigation, I understand that this may result in the denial of employment verification of an offer of employment or termination of employment.

Although management makes every effort to accommodate individual preferences, business needs may at times make the following conditions mandatory: overtime, change in work location, a rotating work schedule, or a work schedule other than Monday through Friday. If employed, I understand and accept these as conditions of my continuing employment. Additionally, I am aware that my employment is contingent on operational requirements. Further, if at the termination of my employment, I owe employer any monies, including without limitation, rent or petty cash, I authorize Employer to deduct any such sum owed from my final paycheck.

In addition to the authorization granted above, I hereby state, certify and represent that I have read the Fair Credit Reporting Act disclosure statement provided to me and that I understand such disclosure statement. I hereby authorize Elon Property Management Inc. and its subsidiaries and related entities to obtain and review the "consumer report" or an "investigative consumer report" referenced in such disclosure statement.

Date _____

Signature _____

*Electronically typing your name in the above signature line shall be considered as an original signature for all purposes.

MARYLAND APPLICANTS ONLY: Under Maryland law, an employer may not require or demand, as a condition of employment, prospective employment, or continued employment, that an individual submit to or take, a lie detector or similar test. An employer who violates this law is guilty of a misdemeanor and subject to a fine not exceeding \$100.

MASSACHUSETTES APPLICANTS ONLY: It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

FAIR CREDIT REPORTING ACT DISCLOSURE

Elon Management LLC (Elon) may conduct a background investigation to obtain information about you in the form of a "consumer report" or an "investigative consumer report" as part of its pre-employment screening process and, if employed by Elon Property Management, from time to time throughout your employment. This / these report(s), if obtained, will be obtained from Real ID, Inc. at 6444 N. Ridgeway Ave, Lincolnwood, IL 60712, (800) 342-7292. This /These report(s) obtained, may contain information about you that Elon Property Management may use for employment purposes, such as information regarding your character, general reputation, personal characteristics, mode of living, criminal background, if any, your employment history and motor vehicle records search. As part of the background investigation and investigative consumer report, Elon Property Management and / or Real ID, Inc. may make inquiries concerning your work history; work habits; work performance; work experience; reasons for termination of past employment from previous employers; motor vehicle operation history; court record, including criminal conviction records as permitted by law; and reference is obtained from professional and personal references.

I request a copy of consumer report prepared by Real ID if one is obtained.

This disclosure is made pursuant to the Fair Credit Reporting Act, 15 U.S.C. 1681b (b) (2)



6444 N Ridgeway Ave
 Lincolnwood, IL 60712
 Phone: (800) 342-7292
 Fax: (866) 973-7268

GCIC CONSENT FORM

I hereby authorize Real ID to receive any Georgia criminal history record information pertaining to me which may be in the files of any state or local criminal justice agency in Georgia.

Full Name (print) _____

Address _____

City _____ State _____ ZIP _____

Social Security Number _____

Date of Birth: _____ Sex _____ Race _____

Signature _____ Date _____

*Electronically typing your name in the above signature line shall be considered as an original signature for all purposes.

Special employment provisions (check if applicable):

_____ Employment with mentally disabled (Purpose code 'M')

_____ Employment with elder care (Purpose code 'N')

_____ Employment with children (Purpose code 'W')

One of the following must be checked:

_____ This authorization is valid for 90 days or 180 days from the date of signature.

-OR-

_____ I give consent to the above named to perform periodic criminal history background checks for the duration of my employment with Elon Property Management.