APPLICATION FOR EMPLOYMENT





VAUGHAN GROUP, LTD.

CENTURION PARTNERS, LLC

APPLICANTS FOR ALL POSITIONS ARE EVALUATED WITHOUT REGARD TO RACE, COLOR, RELIGION, CREED, GENDER, GENDER IDENTIFICATION, ORIGIN, AGE, DISABILITY, MARITAL OR VETERAN STATUS, SEXUAL ORIENTATION AND ANY OTHER LEGALLY PROTECTED STATUS.

Please Print

Position applie	d for		Date of application			
Last name First name			Middle name			
Address	Number	Street	City	State	Zip Code	
Telephone Nun	nber(s)		Social security number	_		
Type of emplo	yment (Circle	e Answer)	Full time	Part time	Season	ıal
Have you been	known by any	y other name(s)			Yes	No
If you are under Do you have a	er 18 years of valid driver's	age, can you provid	ears; if yes specify de proof of eligibility to work		Yes Yes Yes	No No No
If Yes, explain Are there curre		Yes	No			
If Yes, state ho Do you have re Do you speak a	liable transpo	ortation	language		Yes	No
Have you ever	been employe				Yes	No
Are you curren May we contac		t amplayar			Yes Yes	No No
	r immigration status	Yes	No			
What date wou	ıld you be ava	ilable for work?				
Are you curren	tly on lay-off	status and subject	to recall?		Yes	No
Can you travel					Yes	No
If Yes, specify	ed or do you n branch, MOS,	ow serve in any bra rank and years of s	anch of the United States Militervice	tary	Yes	No
Have you been convicted of any crime (except minor traffic violations) Conviction will not necessarily disqualify an applicant from employment						No
If yes, state th	e conviction(s	s) and briefly descr	be the circumstances			
Have you been a plaintiff or a defendant in a lawsuit within the last 7 years? If yes, briefly describe the circumstances and disposition					Yes	No

EDUCATION

High School	Name and address of school	Course of study	Years completed	Diploma degree
Technical or Business school				
Undergraduate College				
Graduate/ Professional				
Other (Specify)				

EMPLOYMENT EXPERIENCE

Current or Most Recent Employment

Employer Employer	Dates Employed		Describe duties
Address	from	То	
Telephone Number(s)	Salary		
Job title	starting	final	
Reason for leaving			

Previous Employment

Employer	Dates Employed		Describe duties
Address	from	То	
Telephone Number(s)	Salary		
Job title	starting	final	
Reason for leaving			

Employer	Dates Employed	
Address	from	То
Telephone Number(s)	Salary	
Job title	starting final	
Reason for leaving		

If you require more space, complete Supplemental Information Form

ADDITIONAL INFORMATION

Professional Licenses or Certifications Do you possess a professional license(s) or certificate(s) required for the position Yes No Is your license in good standing as of the date of this application? Yes No Has your license ever been revoked or suspended? Yes No If yes, please explain _ Profession or trade Licensing agency License number Date issued Professional, trade, Business/Civic Activities or Awards You Wish Us To Consider Additional Relevant Skills or Qualifications **References** Reference 1 Name Telephone Number () Relation to you Reference 2 Name Telephone Number (Relation to you Reference 3 Name Telephone Number () Relation to you Additional Information You Wish to Be Considered

APPLICANT HEREBY CERTIFIES, WARRANTS AND REPRESENTS THAT THE ALL OF THE INFORMATION PROVIDED BY APPLICANT IN THIS EMPLOYMENT APPLICATION IS TRUE AND ACCURATE IN ALL RESPECTS. APPLICANT UNDERSTANDS AND ACKNOWLEDGES THAT PROVIDING ANY FALSE, MISLEADING OR MATERIALLY INACCURATE INFORMATION ON THIS EMPLOYMENT APPLICATION WILL RESULT IN IMMEDIATE DISCIPLINARY ACTION UP TO AND INCLUDING TERMINATION FROM EMPLOYMENT.

			Date:
	APPLICAN	T SIGNATURE	
Print N	ame:		
<u>9</u>	CONSENT, AUTHORIZAT	ION, RELEASE AND HO	OLD HARMLESS
	TO BACKG	ROUND INVESTIGATION	<u>N</u>
involves obtaining information	tion about you from variou	s public and private sour	cants for employment. The investigation ces. Applicant acknowledges, understands ith this application for employment.
	Requ	uired Information	
Name	First	Middle	 Maiden
Date of Birth*			
Month *Date of birth is requested exclus	Day	Year record retrieval.	
	Consent, Authorizat	tion, Release and Hold	l Harmless
obtain, verify and exchange by any entity or person, is reporting agencies, and prepartners, directors, employ information provided in my VGL and consents and agrobtained in its sole discrete become an employee. Further, vendors affiliated information or reports in	ge, presently and in the functuding but not limited resent or past employers. Wees, agents, affiliates and Employment Application rees to such verification. Thereby release and partners, officers, direction with your appropriation with your appropriations.	ture, information or any to city, county, state, f "VGL" shall mean and i I related companies. I ur is subject to verification I understand and agreesion on your employment agree to hold harmless ectors, employees, agen lication from and agains	reports concerning me as are maintained rederal law enforcement agencies, credit nclude Vaughan Group, Ltd., its officers, aderstand, acknowledge and agree that all by any representative, agent or vendor of that VGL may consider any informations, all of which is ongoing in the event you VGL, its past, present and future agents, at any and all claims, demands, suits, or handling of said reports or information
			Date:
	APPLICANT	SIGNATURE	Dutc
Print N	ame:		-
Ver. 031021			

SUPPLEMENTAL INFORMATION FORM

Applicant:			
Add	DITIONAL EN	PLOYMEN	T HISTORY
Employer	Dates Employed		Describe duties
Address	from	То	
Telephone Number(s)	Sala	ary	
Job title	starting	final	
Reason for leaving			
Employer	Dates Er	nnloved	Describe duties
			bescribe duties
Address	from	То	
Telephone Number(s)	Sala	ary	
Job title	starting	final	
Reason for leaving			
Employer	Dates Er		Describe duties
Address	from	То	
Telephone Number(s)	Sala	ary	
Job title	starting	final	
Reason for leaving			
	ADDITIONA	L REFERE	NCES
Reference 4			
Name	Te	lephone Nu	umber ()
Relation to you			
Reference 5			
Name	Te	lephone Nu	umber ()
Relation to you			
		-	