

SOUTHERN CHOICES, LLC
APPLICATION

ALL APPLICANTS ARE EVALUATED WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A NON-JOB RELATED HANDICAP OR ANY OTHER LEGALLY PROTECTED STATUS.

RELATED AGE, MARITHOUT REGAR

Position Sought:

How did you learn about the position?

Name

Address

City

State

(Home)

(Work).

- Zip

_(Cell). Social Security Number:

_Desired Wage/Salary \$

Email Address:

What date would you be available for work?

Are you a U.S. citizen, or are you otherwise authorized to work in the U.S. without any restriction? Yes No

List any language you speak:

Have you ever been convicted of a felony? Yes No

If yes, please describe the circumstances:

Have you ever been involuntarily terminated or asked to resign from any position of employment? Yes No

If yes, please describe the circumstances:

If selected, are you willing to submit to a pre-employment drug screening test? Yes No

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Education Years Attended

School Name

Location

Degree Received

Major

Other training, certifications, or licenses Location

Years Attended Received

Name

Award

List other information pertinent to the position you are seeking:

| ACKNOWLEDGMENT AND AUTHORIZATION

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for the

hiring process as may be necessary in arriving at a decision.

This application shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for hire beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any relationship with this organization is of an "at will" nature, which means that the Applicant may resign at any time and that Southern Choices, LLC may discharge the Applicant at any time with or without cause. It is further understood that this "at will" relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of hire, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of Southern Choices, LLC.

Signature of Applicant

Date

EMPLOYMENT (Five Years of Employment History is Required)

(Most Recent First.)

Job Title

to

State

Zip

1. Employer Dates Employed (month and year – month and year) Prior Position Held within Company (if any): . Address

City Phone

Job Title Starting Salary

Ending Salary Duties Performed Reason for Leaving

Supervisor_

2. Employer

Job Title Dates Employed (month and year – month and year)

to Prior Position Held within Company (if any): Address

City

State Phone

Job Title

Supervisor Starting Salary

Ending Salary Duties Performed Reason for Leaving

-

en

Job Title

to

3. Employer Dates Employed (month and year – month and year) Prior Position

Held within Company (if any): Address Phone

Job Title Starting Salary

– Duties Performed Reason for Leaving

City

State

Supervisor Ending Salary

Zip

4. Employer

Job Title Dates Employed (month and year – month and year) Prior Position Held

within Company (if any); Address

City

State Phone

Job Title

Supervisor Starting Salary

Ending Salary Duties Performed Reason for Leaving

5. Employer

Job Title Dates Employed (month and year --- month and year).

to Prior Position Held within Company (if any): Address

City

State Phone

Job Title

Supervisor Starting Salary

Ending Salary Duties Performed Reason for Leaving

Was

Southern
Choices, LLC

REFERENCE LIST

Applicant Name:

**Address: Phone
number:**

Please select three individuals (supervisors or equal) who are familiar with your job qualifications and that you have known for at least one year.

Name of Reference:

Company/School

Name: Address:

City/State/Zip code:

Telephone: Day:

E-mail Address:

Evening:
g:

Name of Reference:
Company/School
Name: Address:
City/State/Zip code:
Telephone: Day:
E-mail Address:

_Evening:
ng:

Name of Reference:
Company/School
Name: Address:
City/State/Zip code:
Telephone: Day:
E-mail Address:

Evening:
g:

Chose two personal references that are NOT family members.

Name of Reference:
Company/School
Name: Address:
City/State/Zip code:
Telephone: Day: E-mail
Address:

Evening:
g:

Name of Reference:
Company/School
Name: Address:

City/State/Zip code:

Telephone: Day;

E-mail Address:

Evenin

g: