



**FIVE GEN**  
MANAGEMENT

**EMPLOYMENT  
APPLICATION**

TODAY'S DATE
--------------

**IMPORTANT:** Please fill out the application accurately and completely. All statements in your application are subject to verification. Incorrect statements may bar or remove you from employment. Resumes may not be substituted for requested application information.

**PLEASE PRINT ANSWERS TO ALL QUESTIONS.**

Five Gen Management, LLC is an equal opportunity employer and does not discriminate against applicants or employees in its employment practices. No question on this application is intended to secure information to be used for such discrimination.

Where did you hear about us? Newspaper Ad? \_\_\_\_\_ Walk In \_\_\_\_\_ Others \_\_\_\_\_ Recommended by Friend/Relative \_\_\_\_\_  
Name \_\_\_\_\_

POSITION(S) APPLYING FOR	RATE OF PAY DESIRED	SOCIAL SECURITY NO.	
DRIVERS LICENSE #	HOME OR MESSAGE PHONE	ALTERNATE PHONE	
STATE: _____	EXP. DATE _____	( ) _____	( ) _____

NAME	LAST	FIRST	MIDDLE	NICKNAME
PERMANENT ADDRESS	APT	CITY	STATE	ZIP
HOW LONG				
MAILING ADDRESS	APT	CITY	STATE	ZIP
HOW LONG				
PREVIOUS ADDRESS	APT	CITY	STATE	ZIP
HOW LONG				
CAN YOU, AFTER EMPLOYMENT, SUBMIT VERIFICATION OF YOUR LEGAL RIGHT TO WORK IN THE UNITED STATES?			WHAT OTHER NAMES HAVE YOU USED IN PRIOR EMPLOYMENT OR SCHOOL?	
<input type="checkbox"/> YES <input type="checkbox"/> NO				

**IN CASE OF EMERGENCY, NOTIFY:**

NAME	ADDRESS
CITY	STATE
ZIP	PHONE #

HAVE YOU WORKED AT FIVE GEN MANAGEMENT, LLC BEFORE?  
IF YES, LIST DATES OF EMPLOYMENT, POSITIONS HELD, AND REASONS FOR LEAVING?  
 YES  NO

HAVE YOU EVER BEEN CONVICTED OF A CRIME OTHER THAN A TRAFFIC VIOLATION?  
IF YES, LIST CHARGE, DISPOSITION, DATES AND CITIES  
 YES  NO

DO YOU WISH EMPLOYMENT	DATE AVAILABLE FOR EMPLOYMENT	SPECIFY DAYS AND HOURS IF PART TIME
<input type="checkbox"/> FULL-TIME <input type="checkbox"/> PART-TIME		

RELATIVES EMPLOYED BY FIVE GEN MANAGEMENT, LLC: LIST NAMES AND JOB TITLES

ARE YOU ABLE TO PERFORM THE ESSENTIAL FUNCTIONS OF THE JOB FOR WHICH YOU ARE APPLYING?  
 YES  NO

IF NO, DESCRIBE THE FUNCTION THAT CANNOT BE PERFORMED:

NOTE: WE COMPLY WITH THE ADA AND CONSIDER REASONABLE ACCOMODATION MEASURES THAT MAY BE NECESSARY FOR ELIGIBLE APPLICANTS/EMPLOYEES TO PERFORM ESSENTIAL JOB FUNCTIONS. APPLICANT MAY BE SUBJECT TO PASSING A MEDICAL EXAM AND SKILL AND AGILITY TEST.

### EDUCATIONAL HISTORY

TYPE OF SCHOOL	NAME OF SCHOOL	COMPLETE ADDRESS OF SCHOOL	COURSES MAJORED IN	# YEARS ATTENDED	
HIGH SCHOOL					GRADUATED <input type="checkbox"/> YES <input type="checkbox"/> NO
COLLEGE				DEGREE	
GRADUATE SCHOOL				DEGREE	
SPECIAL SCHOOLING					

### PAST EMPLOYMENT INFORMATION (LAST 10 YEARS)

BEGINNING WITH MOST RECENT, LIST ALL PRESENT AND PAST EMPLOYMENT FOR THE PAST TEN (10) YEARS INCLUDING SUMMER, PART-TIME EMPLOYMENT AND U.S. MILITARY SERVICE. FOR UNEMPLOYED OR SELF-EMPLOYED PERIODS, SHOW DATES, EARNINGS, AND LOCATION. (USE SUPPLEMENTAL PAGE IF NECESSARY) DO NOT LEAVE ANY PERIODS UNACCOUNTED FOR.				
EMPLOYER'S NAME ADDRESS AND TELEPHONE NUMBER	DATE MO. YR.	LAST RATE	JOB TITLE/ IMMEDIATE SUPERVISOR SUPERVISORS TITLE	REASON FOR LEAVING
1.	FROM		JOB TITLE	
	TO		SUPERVISOR'S NAME	
	AREA CODE & PHONE NO.		SUPERVISOR'S TITLE	
				MAY WE CONTACT THIS EMPLOYER: <input type="checkbox"/> YES <input type="checkbox"/> NO
2.	FROM		JOB TITLE	
	TO		SUPERVISOR'S NAME	
	AREA CODE & PHONE NO.		SUPERVISOR'S TITLE	
				MAY WE CONTACT THIS EMPLOYER: <input type="checkbox"/> YES <input type="checkbox"/> NO
3.	FROM		JOB TITLE	
	TO		SUPERVISOR'S NAME	
	AREA CODE & PHONE NO.		SUPERVISOR'S TITLE	
				MAY WE CONTACT THIS EMPLOYER: <input type="checkbox"/> YES <input type="checkbox"/> NO
4.	FROM		JOB TITLE	
	TO		SUPERVISOR'S NAME	
	AREA CODE & PHONE NO.		SUPERVISOR'S TITLE	
				MAY WE CONTACT THIS EMPLOYER: <input type="checkbox"/> YES <input type="checkbox"/> NO

USE SUPPLEMENTAL PAGE IF MORE SPACE IS NECESSARY

GIVE THREE (3) REFERENCES WHOM YOU HAVE KNOWN FOR AT LEAST FIVE (5) YEARS. (NO RELATIVES OR FORMER EMPLOYERS.)

NAME	ADDRESS (STREET, CITY, STATE, ZIP)	OCCUPATION	TELEPHONE NUMBER	YEARS KNOWN

**SKILLS INVENTORY SURVEY**

THIS INVENTORY SURVEY IS DESIGNED TO HELP US DETERMINE YOUR INTERESTS AND QUALIFICATIONS FOR EMPLOYMENT IN VARIOUS JOB CLASSIFICATIONS OR POSITIONS WITHIN THE COMPANY.

Please specify the skills you possess for the position(s) for which you have applied.

---



---



---

Please list any other specific skills, training or experience you have obtained which would be valuable to a potential employer.  
(Example: CPR training, secretarial skills, electronics, computers, etc.)

---



---



---

3. Explain briefly how and where you acquired the skills, training or experience mentioned in part 2 above.

---



---



---

Languages: List languages, including English, which you speak fluently:

Speak	Read	Write
_____	_____	_____
_____	_____	_____
_____	_____	_____

**DRIVING DATA**

(To be completed ONLY if applying for a position which requires driving)

- Do you have a valid Driver's License?  YES  NO If "YES" which state \_\_\_\_\_
- Have you ever:
- been refused a driver's license?  YES  NO
  - had your driver's license revoked, suspended, or restricted?  YES  NO
  - been involved in an accident which was your fault?  YES  NO

If answer to any of the above is "YES", please explain fully below.

---



---



---



---

**Applicant Agreement and Written Authorization**  
**Please read carefully before signing**

I understand Five Gen Management, LLC requires certain information about me to evaluate my qualifications for employment.

I understand Five Gen Management, LLC may investigate my driving record, and my criminal record. I hereby release Five Gen Management, LLC. and any persons, company or institution that provides Five Gen Management, LLC with information from any and all liability for any damages that may result from the investigation, use or disclosure of such information. I understand that false, incomplete, misleading statements on this application, if any, may be considered cause for dismissal when discovered. I also understand that information provided on this application may be used to make an employment decision. In consideration of my potential employment I agree to conform to the rules of this company. I understand that I have a right to terminate my employment at any time with or without notice, with or without cause, and that Five Gen Management, LLC. has a similar right.

I understand that my employment by this Company does not constitute a guarantee that any position be continued for any length of time or that any job, assignment or shift be permanent. I understand that no one other than the Manager of Five Gen Management, LLC has authority to make any other agreement and any agreement by the Manager must be in writing and signed for it to be binding.

I understand that Five Gen Management, LLC. will attempt to verify statements made on my application and made during my employment interview. The use of this application does not indicate there are positions open and does not in any way obligate Five Gen Management, LLC. Five Gen Management is a drug free workplace where it is intended that Five Gen Management, LLC. will provide a working environment free of the use of alcohol or non-prescribed drugs.

Five Gen Management, LLC. is an equal opportunity employer and will not discriminate against any employee or applicant for employment in any manner prohibited by law. No question on this application is intended to secure information to be used for such discrimination. If you feel that you have been unfairly treated or discriminated against for any reason, please call this to the attention of the Director of Human Resources so that we may address your concerns. **I FURTHER UNDERSTAND THAT ANY INFORMATION REGARDING MY CRIMINAL OR MILITARY HISTORY WILL NOT NECESSARILY DISQUALIFY ME FROM THE JOB FOR WHICH I AM APPLYING OR HIRED.**

**PLEASE NOTE: IF YOU ARE OFFERED EMPLOYMENT, YOU WILL BE REQUIRED TO SUBMIT TO A PRE-EMPLOYMENT DRUG TEST. IF YOU REFUSE TO BE TESTED, THE JOB OFFER WILL BE WITHDRAWN. ADDITIONALLY, YOU MAY BE REQUIRED TO PROVIDE A DMV SUMMARY OF YOUR DRIVING RECORD.**

Date \_\_\_\_\_

Signature \_\_\_\_\_