

Employment Application

Cyrco, inc. (Cyrco) is an equal opportunity employer. Applicants are considered for positions without regard to veteran status, uniformed service member status, race, color, religion, sex, national origin, age, physical or mental disability, genetic information or any other category protected by applicable federal, state, or local laws.

CYRCO IS AN AT-WILL EMPLOYER AS ALLOWED BY APPLICABLE STATE LAW. THIS MEANS THAT REGARDLESS OF ANY PROVISION IN THIS APPLICATION, IF HIRED, THE COMPANY MAY TERMINATE THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY REASON, WITH OR WITHOUT CAUSE OR NOTICE.

Important Instructions for Completing this Application:

Cyrco will not accept or review an incomplete Application. All information and question sections must be completed. If any item is not applicable, use N/A (for Not Applicable) to complete the item.

Applicant Information

Full Name: _____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____ *City* *State* *ZIP Code*

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

Position Applied for: _____

Do you have a valid Driver's License or Government Issued ID? YES NO

Do you have a bank account? YES NO

Are you willing to work overtime, weekends and/or holidays? YES NO

Are you a U.S. Citizen or legally eligible to work in the U.S.? YES NO

Note: If hired, you will be required to provide documentation that you are eligible to work in the U.S.

Cyrco is an E-verify employer.

Have you previously applied for employment with Cyrco? YES NO

If Yes, when and where did you apply?

Have you been previously employed by Cyrco? YES NO

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If Yes, list date(s) of employment, location and reason for separation from employment with Cyrco:

Have you ever been convicted of a felony? YES NO

If Yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please provide three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Employment History

Please provide the following information for your last seven (7) years of employment, beginning with the most recent. If additional space is needed, please attach a separate page. If self-employed, please supply firm name and business references.

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

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Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Supervisor Name/Phone Number: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Supervisor Name/Phone Number: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

Supervisor Name/Phone Number: _____

May we contact your previous supervisor for a reference? YES NO

Skills, Certifications, Special Training

List/describe any skills, certifications, specialized training or other qualifications for the type of employment you are seeking:

I understand and agree that if driving is a requirement of the job for which I am applying, my employment and/or continued employment is contingent on possessing a valid driver's license for the state in which I reside and automobile liability insurance in an amount equal to the minimum required by the state where I reside.

I understand that Cyrco is a drug-free workplace and has a drug and/or alcohol testing program consistent with applicable federal, state, and local law. If I am offered a conditional offer of employment, I understand that if a pre-employment (post-offer) drug and/or alcohol test is positive, the employment offer may be withdrawn. I agree to work under the conditions requiring a drug-free workplace, consistent with applicable federal, state, and local law. I also understand that all employees of the location, pursuant to the Company's policy and federal, state, and local law, may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol or illegal or controlled drugs.

If employed, I understand that the taking of alcohol and/or drug tests is a condition of continual employment and I agree to undergo alcohol and drug testing consistent with Cyrco's policies and applicable federal, state, and local law.

If employed by Cyrco, I understand and agree that the Company, to the extent permitted by federal, state, and local law, may exercise its right, without prior warning or notice, to conduct investigations of property (including, but not limited to, files, lockers, desks, vehicles, and computers) and, in certain circumstances, my personal property.

I understand and agree that as a condition of employment and to the extent permitted by federal, state, and local law, I may be required to sign a confidentiality, restrictive covenant, and/or conflict of interest statement.

By my signature below, I certify that all the information on this application, my résumé, or any supporting documents I may present during any interview is and will be complete and accurate to the best of my knowledge. **I understand that any falsification, misrepresentation, or omission of any information may result in disqualification from consideration for employment or, if employed, disciplinary action, up to and including immediate dismissal.**

Signature: _____ Date: _____

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CYRSCO IS AN E-VERIFY EMPLOYER.