



Application For Employment

(Must be completed even if attaching a resume)

If you are ready to begin working with On Assignment Engineering, we're ready to start working with you. Please complete the application and one of our experienced recruiters will contact you soon.

Please be assured that On Assignment maintains a strict privacy policy. We will not share your information with any third party without your authorization and will only contact you for the specific purpose of serving your request.

Contact Information

____/____/____
Today's Date

Name (Last, First, Middle Initial)

Address

City State Zip

Primary Phone Cell Phone

Email Address

NOTE: For security purposes, this must be a private email address. If you do not have an email address please leave blank.

Emergency Contact 1 (Name & Phone Number)

Emergency Contact 2 (Name & Phone Number)

Education (Please do not note the year high school diploma was received)

High School City State

Did you graduate? Yes No

College / University Degree Earned

City State From To Present

Major Minor

Relevant Course Work:

College / University Degree Earned

City State From To Present

Major Minor

Relevant Course Work:

Name: _____



Professional Experiences

List in order from most recent.

Employer _____ City _____ State _____
_____/_____/____ - ____/____/____ Present _____ Annual Hourly
From To Title Salary

Description: _____

Immediate Supervisor: _____ May We Contact? Yes No

Reason for Leaving: _____

Employer _____ City _____ State _____
_____/_____/____ - ____/____/____ Present _____ Annual Hourly
From To Title Salary

Description: _____

Immediate Supervisor: _____ May We Contact? Yes No

Reason for Leaving: _____

Employer _____ City _____ State _____
_____/_____/____ - ____/____/____ Present _____ Annual Hourly
From To Title Salary

Description: _____

Immediate Supervisor: _____ May We Contact? Yes No

Reason for Leaving: _____

Employer _____ City _____ State _____
_____/_____/____ - ____/____/____ Present _____ Annual Hourly
From To Title Salary

Description: _____

Immediate Supervisor: _____ May We Contact? Yes No

Reason for Leaving: _____

Name: _____



References

Position Held: _____ Dates of Employment: / / - / /
From To

Employer

Address City State Zip

Supervisor/Person to Contact Title Phone Email

Comment: _____

Position Held: _____ Dates of Employment: / / - / /
From To

Employer

Address City State Zip

Supervisor/Person to Contact Title Phone Email

Comment: _____

Position Held: _____ Dates of Employment: / / - / /
From To

Employer

Address City State Zip

Supervisor/Person to Contact Title Phone Email

Comment: _____

Name: _____



Professional Organizations

| | | | |
|--------------------|------------|---|----------------------------------|
| Organization _____ | Role _____ | From ____/____/____ - To ____/____/____ | <input type="checkbox"/> Present |
| Organization _____ | Role _____ | From ____/____/____ - To ____/____/____ | <input type="checkbox"/> Present |
| Organization _____ | Role _____ | From ____/____/____ - To ____/____/____ | <input type="checkbox"/> Present |

Certifications

| Type of Certificate: | Certificate #: | Expiration Date: |
|----------------------|----------------|------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Licensures

| | | | |
|---------------|-------------|------------------------|------------------------|
| License _____ | State _____ | Licensure Number _____ | Expires ____/____/____ |
| License _____ | State _____ | Licensure Number _____ | Expires ____/____/____ |
| License _____ | State _____ | Licensure Number _____ | Expires ____/____/____ |
| License _____ | State _____ | Licensure Number _____ | Expires ____/____/____ |

Name: _____

Employment Questions



Position applying for: _____

Date available: ____/____/____

What kind of transportation will you use to get to work? Public Private

How many weeks notice do you need to give your current employer? _____

How far are you willing to commute on a daily basis? _____ Miles _____ Minutes

Check preferred employment type: Contract Contract-to-hire Direct Hire

Check the days you are willing to work: Any M T W Th F S Su

Check the shifts you are willing to work: Any Days Nights Evenings Weekends

Would you prefer to work: Either Part-time Full-time

Can you, after employment, submit verification of your legal right to work in the U.S.? Yes No

Have you been convicted of a felony within the last seven years? Yes No

(An affirmative response to this question will not necessarily disqualify you from employment)

As a condition of employment, you may be required to take and pass a drug and/or alcohol screen. Testing will be done at the company's expense and administered by a testing facility designated by company. Results of any testing will be kept strictly confidential. If requested, are you willing to take the drug and/or alcohol screen? Yes No

| | | | |
|---|-------------------------------------|--------------------------------------|------------------------------------|
| How did you hear about On Assignment Engineering? | | | |
| <input type="checkbox"/> www.onassignment.com | <input type="checkbox"/> Brochure | <input type="checkbox"/> Mail Piece | <input type="checkbox"/> Email |
| <input type="checkbox"/> Magazine | <input type="checkbox"/> Phone Call | <input type="checkbox"/> Internet Ad | <input type="checkbox"/> Job Fair |
| <input type="checkbox"/> Yellow Pages | <input type="checkbox"/> Web Search | <input type="checkbox"/> Monster.com | <input type="checkbox"/> Newspaper |
| <input type="checkbox"/> Careerbuilder.com | <input type="checkbox"/> Referral | <input type="checkbox"/> Flyer | |

Qualifications:

Months since last job in Engineering: _____

Total years of experience: _____

Security Clearance: (Optional)

- None Actively Confidential Active Secret Active Top Secret Active Top Secret/SCI
- Inactive Confidential Inactive Secret Inactive Top Secret Inactive Top Secret/SCI

US Military Service: (Optional)

- None Active Duty Retired Military Veteran/Prior Service Reservist
- National Guard Inactive Reserve/Guard

Primary Language: _____ Second Language: _____ Other Language: _____

On Assignment is an Equal Opportunity Employer. All applicants are considered for employment regardless of age, race, gender, religion, national origin, disability, marital status, or any other factor prohibited by law.

I understand and agree that if I am offered employment by the Company, it will be on an at-will basis. This means that either I or the Company may terminate the employment relationship at any time, for any reason, with or without cause. I also understand and agree that only an officer of the Company can enter into an agreement on any other terms and he/she can only do so in writing signed by him/her and me. I certify the information provided within this on-line submission is accurate. I understand that the withholding of information or the giving of false information for this on-line registration and/or phone interview for submission will result in a refusal to hire or disciplinary action up to and including termination after employment commences.

I have read and/or have been verbally read the information above before checking the box below for remittance and/or giving my permission to submit my application on-line to the customer service representative who has taken my verbal registration.

Signature _____

Date _____