

Application for Employment

CSLLC (Control Solutions, LLC) is an Equal Opportunity Employer. It is the policy of the Company to provide equal employment to all qualified persons without discrimination on the basis of sex, pregnancy, race, color, religion, creed, age, marital status, national origin, citizenship, disability, veteran status, gender and genetic information or pre-disposition or any other status protected under local, state and federal law. Upon your request, CSLLC will provide assistance if you have a disability which prevents you from filling out this form. **PLEASE PRINT ALL INFORMATION EXCEPT SIGNATURE.**

Applicant Information

First Name	Middle Initial	Last Name	Social Security Number
Address	Street	Mailing	
City	State	Zip Code	
Telephone Numbers (including area code)	Home	# During the day	Best time/way to reach you

Position applying for:	Date:
Salary requirements:	Date available for work:
Are you available to work: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time If part time, hours available:	

Are you currently employed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been employed by CSLLC?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever applied for a position with CSLLC?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any relatives or friends that work for CSLLC? If yes, who?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you 18 years of age or older?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you legally authorized to work in this country? (Proof of identity and eligibility to work in the U.S will be required upon employment)	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you able to perform the essential functions of the job for which you are applying with or without a reasonable accommodation? (If No, please describe functions you are unable to perform below.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
How did you learn about CSLLC?	<input type="checkbox"/> Advertisement <input type="checkbox"/> Employment Agency <input type="checkbox"/> Employee (name) _____ <input type="checkbox"/> Walk-in <input type="checkbox"/> Recruiting Event <input type="checkbox"/> Other (describe) _____

Education

	Name & Address of School	Course of Study	Number of Years Completed	Diploma/ Degree
High School/GED				
College				
Graduate/Professional				
Other (Specify)				

Employment Experience List current or most recent job first. Also list all employment while in U.S. Military service, and any work done on a volunteer basis. Add additional pages if necessary.

Company Name	Employed (Month and Year) From _____ To _____
Address	Salary Starting _____ Final _____
Name of Supervisor	Telephone and Extension ()
Your Job Title	Reason for Leaving
Describe Job Duties	May we contact for reference check? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> After offer

Company Name	Employed (Month and Year) From _____ To _____
Address	Salary Starting _____ Final _____
Name of Supervisor	Telephone and Extension ()
Your Job Title	Reason for Leaving
Describe Job Duties	May we contact for reference check? <input type="checkbox"/> Yes <input type="checkbox"/> No

Company Name	Employed (Month and Year) From _____ To _____
Address	Salary Starting _____ Final _____
Name of Supervisor	Telephone and Extension ()
Your Job Title	Reason for Leaving
Describe Job Duties	May we contact for reference check? <input type="checkbox"/> Yes <input type="checkbox"/>

Employment Information

1 Will you work overtime if/when necessary?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2 Are there any hours or days of the week you cannot work? If so, when?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3 Have you received a description of the job or been made aware of the essential functions of the job?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4 Do you understand the job requirements? (If no, please explain.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
5 Are you currently bound by a non-compete or trade secret agreement? (If yes, please explain.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Have you ever been discharged or asked to resign from a job? (If yes, please explain.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
7 Do you have any Military service: If yes, what branch and dates served:	<input type="checkbox"/> Yes <input type="checkbox"/> No
8 Do you have Security Clearance: If yes, what Level:	<input type="checkbox"/> Yes <input type="checkbox"/> No

Acknowledgement of Conditions of Employment

Please read the following statements carefully before signing to indicate your understanding.

I understand that nothing in this application for employment is intended or should be construed as an offer, agreement, or contract of employment for any specific period of time. I understand that any offer of employment that may be made to me is conditioned upon: 1) completion of reference and background checks, including security investigation, to which I hereby consent; 2) successful completion of a drug screen, to which I hereby consent; and 3) my ability to provide, within 72 hours of the commencement of any such employment, acceptable documentation of my identity and eligibility to work in the United States. I hereby release the Company and its officers from any liability or claims that may result from conducting the above investigation.

I understand that CSLLC will keep applications active for ninety (90) days and that I will have to complete another application if I wish to be considered for any position that becomes available after that timeframe.

I understand that CSLLC is a Drug Free workplace. In the event that CSLLC employs me, I will comply with all rules and regulations as set forth in the Company's employee guidelines and other communications to employees, as they may be in existence from time to time. I further understand and agree that, employment with CSLLC is on an at-will basis, that it is for no definite period of time and that it is terminable "at will" by either the Company or myself, with or without notice or cause.

I hereby authorize any former employer, person, school, firm, or corporation listed hereon to answer any and all questions related to employment and agree to release from liability and hold all persons harmless for giving any and all truthful information within their knowledge or records.

I hereby authorize CSLLC to report any information to any prospective employer, governmental agency or any other person or entity having a legitimate business need concerning transactions or experiences between myself and the Company arising out of my employment.

I certify that all the statements, information, resume and attachments given by me in this application and during the application process are true and complete, and I understand that any falsification, misrepresentation, or material omission on my part may result in the termination of consideration of my application or dismissal from employment.

Date

Signature of Applicant

CSLLC has affirmative action plans which describe its efforts to recruit, employ, and advance in employment, minorities and females, qualified persons with disabilities and qualified covered veterans. If you are an individual with a disability, a Vietnam era veteran, or a special disabled veteran, and would like to be considered under the affirmative action program, please tell us, either at this time or at any time in the future. This information will assist us in placing you in an appropriate position and if you are an individual with a disability or a special disabled veteran, in making accommodations for your disability.

Providing this information is strictly voluntary. Any information you provide will be kept confidential and will not be used in a manner inconsistent with the law. Furthermore, refusal to provide this information will not subject you to any adverse treatment.

Field/Corporate Use Only

Requisition #: _____

Hiring Manager: _____

Category of position applied for (check one):

- | | |
|--|--|
| <input type="checkbox"/> 1A – Executive & Directors | <input type="checkbox"/> 5A – Administrative/Secretarial |
| <input type="checkbox"/> 1B – Managers & Supervisors | <input type="checkbox"/> 5B – Field Clerical |
| <input type="checkbox"/> 2A – Administrative Professionals | <input type="checkbox"/> 5F – Financial Clerical |
| <input type="checkbox"/> 2B – Computer Professionals | <input type="checkbox"/> 5O – Other Clerical |
| <input type="checkbox"/> 2C – Recruiters | <input type="checkbox"/> 6 – Craft Workers (Skilled) |
| <input type="checkbox"/> 4A – Sales | <input type="checkbox"/> 7 – Operatives (Semi-skilled) |
| | <input type="checkbox"/> 8 – Laborer (Unskilled) |
| | <input type="checkbox"/> 9 – Service Workers |

Invitation to Self-Identify *Must choose to complete the below information or check the box not to self-disclose. Thank you!*

CSLLC is an affirmative action/equal opportunity employer offering employment without regard for an individual's sex, pregnancy, color, race, national origin, citizenship, age, religion, creed, marital status, sexual orientation, disability, veteran status, gender and genetic information or pre-disposition or any other status protected under local, state and federal law. Employment decisions are based solely on job-related criteria, such as an individual's merit, qualifications, skills and abilities.

You are invited to provide information to assist CSLLC in complying with its government reporting requirements and furthering its affirmative action efforts in the employment and advancement of qualified minorities, females, individuals with disability and veterans, including disabled veterans and Vietnam era-veterans. **Providing this information is strictly voluntary and any information you provide will be kept confidential and will not be used as the basis for any adverse employment decision.**

Name: _____

Position Applying for: _____

Location: _____

<p>Applicant Chooses Not to Self-Disclose</p> <p>_____ YES</p>
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Race/Ethnic Designation (Please check):

- Hispanic or Latino:** A person of Cuban, Mexican, Puerto Rican, Central or South American, or other Spanish culture Origin, regardless of race.
- White** (Not of Hispanic or Latino origin): A person having origins in any of the original peoples of Europe, North Africa, of the Middle East.
- Black or African American** (Not of Hispanic or Latino origin): A person having origins in any of the Black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander** (Not of Hispanic or Latino origin): A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- Asian** (Not of Hispanic or Latino origin): All persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- American Indian or Alaska Native** (Not of Hispanic or Latino origin): A person having origins in any of the original peoples of North America and South America (including Central America), and who maintain tribal affiliation or community attachment.
- Two or More Races** (Not of Hispanic or Latino origin): All persons who identify with more than one of the above six races.
- Race Missing or Unknown:** Applies to Applicants only, where a resume or application that is screened is received without any racial or ethnic identification and no further contact is made with the applicant.

Sex (Please check): Male Female

Veteran Status (See definitions below):

- Disabled Veteran Veteran of the Vietnam-era
- Newly Separated Veteran Other Protected Veteran

Definitions:

'Special Disabled Veteran' means (i) a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Department of Veterans Affairs for a disability (A) rated at 30 percent or more, or (B) rated at 10 or 20 percent in the case of a veteran who has been determined under Section 38 U.S.C. 3106 to have a serious employment handicap or (ii) a person who was discharged or released from active duty because of a service-connected disability.

'Veteran of the Vietnam-era' means a person who: (i) served on active duty in the U.S. military, ground, naval or air service for a period of more than 180 days, and who was discharged or released therefrom with other than a dishonorable discharge, if any part of such active duty was performed: (A) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (B) between August 5, 1964, and May 7, 1975, in all other cases; or (ii) was discharged or released from active duty in the U.S. military, ground, naval or air service for a service-connected disability if any part of such active duty was performed (A) in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or (B) between August 5, 1964 and May 7, 1975, in any other location.

'Newly Separated Veterans' means any veteran who served on active duty in the U.S. military, ground, naval or air service during the one-year period beginning on the date of such veteran's discharge or release from active duty.

'Other Protected Veterans' means veterans who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized.