

C.S.T. Connection, Inc.

DATE: _____

EQUAL OPPORTUNITY EMPLOYER

Position applying for: _____

SMOKER

NON-SMOKER

NAME _____
 LAST FIRST MIDDLE

ADDRESS _____
 STREET APT. NO. CITY STATE ZIP

PHONE _____
 CELL _____
 E-MAIL _____

ALTERNATE PERSON Name: _____
 WHO CAN REACH YOU Relationship: _____ Phone _____

How did you hear about us? newspaper job service yellow pages
 friend; who? _____
 other _____

HAVE YOU BEEN CONVICTED OF A FELONY IN THE LAST SEVEN (7) YEARS? Y N
 (Such conviction may be relevant if job related, but does not keep you from employment) If yes, please explain

HOURLY RATE EXPECTED? _____ WHEN CAN YOU START WORK? _____

NOTIFY IN CASE OF EMERGENCY _____ PHONE _____

Are you below the age of 18 years? Y N

Type of employment desired ___ Full Time ___ Part Time ___ Temp ___ Weekend

Are you legally eligible for employment in this country? (proof of US citizenship or immigration status will be required upon employment)

AVAILABILITY REQUIREMENTS S M T W T F S EDUCATION (Last grade completed) 10 11 12 13 14 15 16

DO YOU HAVE YOUR OWN TRANSPORTATION? _____

Days Available

Hours Available A.M. P.M. OTHER EDUCATION _____

Social Security # _____

FROM/TO	END PAY	COMPANY NAME AND ADDRESS	SUPERVISOR NAME PHONE NUMBER	TYPE OF WORK	REASON FOR LEAVING	MAY WE CONTACT? Y N	REF. CHECK
						Y N	
						Y N	
						Y N	
						Y N	

Previous Temporary Work:

Temporary Service Name	From/To	Type of Work	Company Assigned To	Pay Rate	Supervisor	Reason(s) for Leaving

FOR OFFICE USE ONLY

Some of the companies we work with require:

Pre-employment drug screening. Is that a problem?

Criminal background check. Is that a problem?

If we had an interview or a position for you which you needed to go to the same day, would that be a problem?

Can you stand for eight (8) hours?

Can you sit for eight (8) hours?

Check the following you have had experience. Double check for special ability or skill.

<p>SECRETARIAL</p> <p>Executive Legal Medical Financial Engineering Insurance Real Estate Sales/Marketing General Transcription</p>	<p>BOOKKEEPING</p> <p>Medical Billing Medical Collections Bookkeeper Full Charge Yes No General Ledger Accounts Payable Accounts Receivable Collections Credit Payroll Financial Statements Accounting Software Exp: _____</p>	<p>DATA ENTRY/CRT</p> <p>Alpha Data Entry Keystrokes/Hour: Numeric Data Entry- Keystrokes/Hour: _____ 10-key touch sight</p> <p>PHONES</p> <p>No. of Lines _____ No. of Extensions _____ Switchboard Pager System</p> <p>GENERAL OFFICE</p> <p>Medical Records File Alpha Numeric Mail Room Other Medical Scheduler</p>	<p>SOFTWARE</p> <p>Windows E-Mail Microsoft Access Microsoft Outlook Microsoft Excel Microsoft Word Microsoft PowerPoint Word Perfect Adobe PageMaker Adobe Illustrator Desktop Publisher QuickBooks Quicken Peachtree Goldmine Solomon Medical Manager</p>	<p>BUSINESS BACKGROUND</p> <p>Telemarketing Retail Sales Outside Sales Bank Teller Customer Service Cashier Merchandiser Purchasing Inventory Control Mortgage Processor Mortgage Closer Other: _____</p>
<p>MATERIAL TYPED</p> <p>Typing: WPM Tax Returns Legal Medical Invoices Financial Reports Correspondence</p>	<p>INFORMATION TECHNOLOGY</p> <p>Web Design Software Design/Development Hardware Programmer System Administrator Network Administrator</p>			<p>FOREIGN LANGUAGE</p> <p>Read / Speak / Translate</p>
<p>ASSEMBLER</p> <p>Printed Circuit Boards Solder Medical Magnifier/Microscope Wire Harness Hand Mil-Spec Solder Blue Prints/Schematics Quality Control (QC)</p>	<p>PRINTING</p> <p>Multigraphic Offset Bindery Web Press</p>	<p>DRIVER</p> <p>Class: A B C E DOT Physical Card Year Expire: _____ Heavy Equip. Operator</p>	<p>ENGINEERING</p> <p>Architectural Electrical Mechanical CAD</p>	<p>MAINTENANCE</p> <p>Painting Plumbing Janitorial Electrical Carpenter HVAC Certified</p>
<p>LIFTING</p> <p>Less than 10 pounds Up to 25 pounds Up to 50 pounds Up to 75 pounds 75-100 pounds</p>	<p>MACHINIST</p> <p>CNC Mills/Lathe Operator Injection Mold Presses Other: _____</p>	<p>ENDORSEMENTS</p> <p>Hazard Material Tandem Air Brakes Passenger Dump Truck Box Truck Tractor Trailer Front End Loader Roll-Off</p>	<p>WAREHOUSE</p> <p>Forklift Certified Pallet Jack Shipping/Receiving Load/Unload Pick/Pull/Pack Orders Material Handler Manifest Shipping Software Purchasing/Logistics</p>	<p>WELDING</p> <p>MIG TIG STICK ARC Fabricator</p>

I certify that the facts set forth in this Application are true and complete, to the best of my knowledge. I acknowledge that C.S.T. Connection, Inc. may rely on my representations in this Application in making its hiring decision.

I authorize investigation of all statements contained herein and authorize the references and previous employers listed above to give C.S.T. Connection, Inc. any and all information requested concerning my previous employment and any pertinent information they may have, personal or otherwise. I hereby release said references and previous employers from all liability for any damages that may result from furnishing the same to C.S.T. Connection, Inc. I agree that if I am required to take a pre-employment drug screening and the results of that screening are positive, I will reimburse C.S.T. Connection, Inc., for the cost of that screening.

I agree that I will not accept a position with a C.S.T. Connection, Inc. customer or client to whom I am assigned to work as a temporary employee, unless and until I have completed 520 consecutive working hours for said customer or client while on C.S.T. Connection, Inc.'s payroll, without receiving written authorization from C.S.T. Connection, Inc. I understand that I may be charged a \$2,000.00 fee if I accept work from a C.S.T. Connection, Inc. client without prior written approval.

If employed, I agree that if at any time I shall make claims against C.S.T. Connection, Inc. for personal injuries, I will submit to examination by a physician or physicians of C.S.T. Connection, Inc.'s selection (at C.S.T. Connection, Inc.'s expense) as often as may be required. I also agree to submit myself to drug examination after making such claim against C.S.T. Connection, Inc., for personal injuries at C.S.T. Connection, Inc.'s expense.

Should I be given employment with C.S.T. Connection, Inc., now or hereafter, I agree that such employment may be terminated by C.S.T. Connection, Inc., at any time without liability to me for wages or salary except such as may have been earned at the date of such termination. I also understand that the first 90-days of my employment with C.S.T. Connection, Inc., are considered my probationary period.

I understand and agree that if I am hired by C.S.T. Connection, Inc., I will not publish, disclose or utilize any confidential information of C.S.T. Connection, Inc., or any clients of C.S.T. Connection, Inc., where I am sent to work. I will assign and disclose to C.S.T. Connection's client any invention perfected or conceived during my hours of work for such client and will sign all papers necessary to enable C.S.T. Connection's client to obtain a patent on these inventions and to obtain copyrights. I agree to indemnify C.S.T. Connection, Inc., against any claim, demand or action alleging an unauthorized disclosure of such confidential information and/or documentation that may be brought against C.S.T. Connection, Inc. by the client.

I understand that the work provided to me by C.S.T. Connection, Inc., may be temporary in nature. I agree to notify C.S.T. Connection, Inc., at the completion of each work assignment. I agree to contact C.S.T. Connection, Inc., on a daily basis after completion of an assignment if I am available to work. If I do not so notify or contact C.S.T. Connection, Inc., within twenty-four (24) hours of completion of an assignment, they may assume that I am no longer available for work and am voluntarily terminating my employment. I agree that if my employment is terminated for misconduct in connection with my work, if I voluntarily resign, take a leave of absence, if I fail to report for work, or if I do not report my availability as required by C.S.T. Connection, Inc., under amended State Unemployment statute 4073A, I may not be eligible to collect unemployment benefits. The law reads as follows: "Temporary Employees. A temporary employee is deemed to have voluntarily quit work if, upon conclusion of the latest assignment, the employee, without good cause, failed to contact the temporary help firm for reassignment, provided that the employer advised the employee at the time of hire that failing to report for reassignment upon conclusion of each assignment could result in a denial of UI benefits."

Signature

_____/_____/_____
Date