



APPLICATION FOR EMPLOYMENT

Please provide complete and legible information. An incomplete application may affect your consideration for employment. If necessary, attach a separate sheet for additional information.

TRUCARE is committed to a policy of Equal Employment Opportunity and will not discriminate against an applicant or employee based on race, color, religion, creed, national origin or ancestry, sex, age, physical or mental disability, veteran or military status, genetic information, sexual orientation, gender identity, marital status, or any other legally recognized protected basis under federal, state, or local law. The information collected by this application is solely to determine suitability for employment, verify identity, and maintain employment statistics on applicants.

Applicants with disabilities may be entitled to reasonable accommodation under the Americans with Disabilities Act and certain state or local laws. A reasonable accommodation is a change in the way things are normally done which will ensure an equal employment opportunity without imposing undue hardship on TRUCARE. Please inform the company's personnel representative if you need assistance completing this application or to otherwise participate in the application process.

Your application will be active for 60 days. If you are not hired during that time but wish to continue to be considered for available positions, you must complete a new application.

Upon employment, employees of TRUCARE may be required to have their picture taken or to provide TRUCARE with a picture of themselves.

GENERAL INFORMATION

Full Name _____				Date _____	
FIRST		MIDDLE		LAST	
Address _____					
STREET			CITY		STATE ZIP CODE
Phone Number (____) _____			Date available for work _____		
Email _____					
Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Do you now, or will you in the future, require immigration sponsorship for work authorization (e.g., H-1B)? <input type="checkbox"/> Yes <input type="checkbox"/> No					
(If hired, verification will be required consistent with federal law.)					
Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No					
(If no, you may be required to provide authorization to work.)					
Do you have a driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Operator <input type="checkbox"/> Commercial (CDL)					
Driver's license number _____		State of issue _____		Expiration date: _____	

POSITION INFORMATION

Position applied for _____ Salary range expected: _____
 Applying for: Full-time Part-time Seasonal/Temporary

EDUCATION

Type of School	School Name and Location	Number of Years Completed	Diploma, Degree, or Certificate Received	Course of Study or Major
High School (or G.E.D. equivalent)				
College or University				
Graduate School				
Vocational or Trade School				
Other				

BACKGROUND INFORMATION

During the past ten (10) years, have you ever been terminated, suspended, or asked to resign from any position?
 Yes No If yes, please explain. _____

For the purpose of verifying information on this application, have you ever worked or attended school under a different name at any of the organizations you have listed?
 Yes No If yes, specify any such name(s). _____

Have you ever been convicted of a crime that has not been expunged, sealed, pardoned, annulled, statutorily eradicated, or dismissed upon condition of probation? You are not required to disclose sealed or expunged records of conviction or arrest, or expunged juvenile records of conviction or arrest.
 Yes No Record
 If yes, please explain. _____

REFERENCES

List three references (other than those listed as a current/former supervisor) that we may contact:

Name _____	Phone No. (____) _____
Email Address _____	Type of Acquaintance _____
Name _____	Phone No. (____) _____
Email Address _____	Type of Acquaintance _____
Name _____	Phone No. (____) _____
Email Address _____	Type of Acquaintance _____

PLEASE READ CAREFULLY AND INITIAL EACH PARAGRAPH BEFORE SIGNING

I understand that, where permissible under applicable federal, state, or local law, I may be subject to a pre-employment drug test after receiving a conditional offer of employment, and must receive a negative result for illegal drug use before being permitted to commence work with TRUCARE.

_____ Initials

I understand that, where permissible under applicable federal, state, or local law, I may be subject to a pre-employment medical examination after receiving a conditional offer of employment, and must meet the qualifications for the position, with or without reasonable accommodation, before being permitted to commence work with TRUCARE.

_____ Initials

I understand that, where permissible under applicable federal, state, or local law, I may be subject to a pre-employment background check after receiving a conditional offer of employment to investigate my criminal background [, driving record] [, credit history], and other matters related to my suitability for employment. I understand that a separate disclosure and consent form will be provided to me prior to any background check.

_____ Initials

I understand that employment with TRUCARE is also contingent on my providing sufficient documentation necessary to establish my identity and eligibility to work in the United States.

_____ Initials

I authorize TRUCARE and its representatives to contact my current and former employers (*with the exception of my current employer, if I have marked "May we contact?" on page 3 of this application as "No"*), schools, references, and other persons or organizations I have named in this application for the purpose of verifying the information I have provided. I release my current and former employers, schools, references, and other persons or organizations named in this application from any liability resulting from the information released. I authorize employers, schools, and other persons or organizations named in this application to provide any information or transcripts requested.

_____ Initials

I hereby certify that, if employed, my employment with TRUCARE will not conflict with, violate, breach, or result in default under, any contract, agreement, or understanding that I am a party to or am bound by, including any non-solicitation, non-competition, or other similar post-employment restriction or agreement I have with any current or former employer, other than the contracts, agreements, covenants, or understandings I have disclosed in this application, if any.

_____ Initials

I understand and agree that, if hired, my employment will be AT WILL, which means employment is for an indefinite period of time and may be terminated by myself or TRUCARE at any time, with or without cause, and with or without notice.

_____ Initials

I certify that all of the above information is true and complete, and I understand that any falsification or omission of information made by me may disqualify me from further consideration for employment or, if hired, may result in my termination at any time during the period of my employment, regardless of the amount of time that has passed.

_____ Initials

Note: An offer of employment is conditioned upon complying with TRUCARE's requirements including, but not limited to, signing a separate disclosure and consent form prior to any background check.

MY SIGNATURE IS EVIDENCE THAT I HAVE READ AND AGREE WITH THE ABOVE STATEMENTS.

Applicant's signature _____

Date _____