



Employment Application

CMC PROPERTIES – LD-4205f

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For		Date of Application	Location
How Did You Learn About Us? <input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Drop in <input type="checkbox"/> Employment Agency <input type="checkbox"/> Relative <input type="checkbox"/> Other			
Last Name	First Name	Middle Name	
Telephone Number(s)	Drivers License No.	State	Social Security Number
E-Mail Address:			
: (List current address and addresses of each of your residences during the past 3 years.)			
Current Address	Street	City	State, Zip
Past Address:	Street	City	State, Zip
Past Address:	Street	City	State, Zip

Best time to contact you at home is.....:_____ AM / PM

If you are under 18 years of age, can you provide proof of your eligibility to work? YES NO

Have you ever filed an application with us before? If yes, give date YES NO

Were you referred by a current Employee Y / N if yes, who _____

Do any of your friends or relatives work here? YES NO

If yes, state name, relationship, and location _____

Are you currently employed? YES NO May we contact your present employer? YES NO

Have you signed a non-compete and/or confidentiality agreement with another employer? YES NO

In the last 5 years, have you received a traffic ticket for any reason other than a parking violation? YES NO

Have you ever been convicted of, or plead no contest or guilty to, any crime (misdemeanor or felony) of any kind, including but not limited to DUI? YES NO

Date available for work _____ What is your desired salary range? _____

Are you available to work? Full Time
 Part Time (Please Circle) Mornings Afternoons Evenings Weekends
 Temporary (Please indicate dates available: _____ to _____)

EDUCATION

School	Name and Address of School	Course of Study	# Years Completed	Diploma/Degree
High School				
College				
Other				

Do you possess skills or knowledge in any of the following areas:

Appliance Repair	Computer Software	HVAC
Carpentry	Drywall	Painting
Ceramic Tile	Electrical	Plumbing
Computer Hardware	Electronics	Roofing

EMPLOYMENT EXPERIENCE

1. Employer	Dates Employed		Worked Performed
Address	From	To	
Telephone Number(s)	Hourly Rate / Salary		
Job Title	Starting	Final	
Supervisor	Phone #		
Reason for Leaving		May we contact <input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Employer	Dates Employed		Worked Performed
Address	From	To	
Telephone Number(s)	Hourly Rate / Salary		
Job Title	Starting	Final	
Supervisor	Phone #		
Reason for Leaving		May we contact <input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Employer	Dates Employed		Worked Performed
Address			
Telephone Number(s)	Hourly Rate / Salary		
Job Title	Starting	Final	
Supervisor	Phone #		
Reason for Leaving		May we contact <input type="checkbox"/> Yes <input type="checkbox"/> No	

REFERENCES (PROFESSIONAL REFERENCES ONLY, NO PERSONAL REFERENCES)

Name	Phone Number	Occupation
1.		
2.		
3.		

APPLICANT'S STATEMENT and AGREEMENT. READ CAREFULLY. SIGN IF YOU AGREE.

I certify that the information stated above is true and complete. I authorize Community Management Corporation to investigate my background and all information provided in my application and interviews. I understand that this application will remain active for 30 days. If I wish to be considered for employment after that date, I must re-apply.

I understand that if I am hired, my employment relationship with Community Management Corporation will be "at will", which means I may resign at any time and Community Management Corporation may discharge me at any time with or without cause. I understand that conduct or statements made by anyone will not change my "at will" status, except for written statements signed by Community Management Corporation's president.

I understand that false or misleading information given in my application or interviews may result in my discharge. I understand, also, that I am required to abide by all rules and regulations of the Employer.

I agree that I will settle any and all claims and disputes that I might have in the future against Community Management Corporation, its owners, officers, directors, managers, employees and agents that arise out of my application for employment, my employment or the termination of my employment with Community Management Corporation *exclusively* by final and binding arbitration before a neutral arbitrator. This agreement to arbitrate does not apply to workers' compensation or unemployment compensation claims, or to claims arising out of any non-compete or confidentiality agreement I may sign with Community Management Corporation.

Signature of Applicant

Date

WE ARE AN EQUAL OPPORTUNITY EMPLOYER



BACKGROUND CHECK RELEASE FORM-employment

PER FCRA: 1) Signing this authorizes a background check. 2) You may not be offered a position based on it. 3) Your employer will advise you if that's their intention. You can review the report and dispute errors prior to official turn-down.

LAST NAME _____ FIRST _____ MIDDLE NAME _____ SOC.SEC# _____ FULL DATE OF BIRTH _____ / ____ / ____ M F

PRESENT Address _____ CITY, ST, ZIP _____ County _____ Years _____

PRIOR Address _____ CTY, ST, ZIP _____ County _____ Years _____

List any other counties in which you resided in the last seven years.

Race _____ (TBI, IN State Police and FDLE require race to run these reports)

DRIVER LIC# _____ STATE: _____ Your phone() _____ Other names used _____

COLLEGE 1) _____ City, ST _____ Dates(years) there: _____ DEGREE? _____

2) _____

H.SCHOOL _____ City, ST _____ Dates(years) there: _____ Graduate? _____

DEGREES/LICENSES _____ YEAR EARNED _____ Name then if different _____

LIST ALL CONVICTIONS INCLUDING TRAFFIC (Indicate "M" for misdemeanor or "F" for felony.)

YR.	NATURE OF OFFENSE	WHERE(CITY/ST COUNTY)	YR.	NATURE OF OFFENSE	WHERE (CITY,ST,COUNTY)
1) _____	_____	_____	2) _____	_____	_____
3) _____	_____	_____	4) _____	_____	_____

Use space here for others: _____

NOTE: INABILITY TO IDENTIFY YOUR PRIOR EMPLOYMENT CAN CANCEL OR DELAY PROCESS. BE VERY THOROUGH IN THIS PART.

PRIOR EMPLOYER NAME	STREET	CITY/ST	PHONE NUMBER	SUPV'R NAME	DATES THERE
1) _____	_____	_____	() _____	_____	FROM _____ TO _____
YOUR POSITION _____	EARNINGS _____	WHY LEFT? _____	CO-WORKER NAME _____		
2) _____	_____	_____	() _____	_____	FROM _____ TO _____
YOUR POSITION _____	EARNINGS _____	WHY LEFT? _____	CO-WORKER NAME _____		
3) _____	_____	_____	() _____	_____	FROM _____ TO _____
YOUR POSITION _____	EARNINGS _____	WHY LEFT? _____	CO-WORKER NAME _____		

CIRCLE ANY EMPLOYER WE'RE NOT FREE TO CONTACT. PLACE CHECK MARK BY ANY EMPLOYER YOU ARE INELIGIBLE FOR REHIRE.

I hereby authorize the release to Background Bureau, Inc., (BBI) an independent pre-employment screening agency, of any information held by any parties regarding my prior employment, criminal, credit, driving, workers comp. and educational history as well as information regarding my general character and reputation. I release any providers of such information from any liability for providing same. I understand the information may be reviewed initially and periodically by BBI and reported to my prospective/actual employer. I agree falsification may make me ineligible for employment or subject to immediate dismissal, if hired. I further acknowledge that BBI is relying on third party information and I therefore release BBI, my prospective employer, and their respective owners, officers, agents and employees from any and all liability arising out of errors or omissions. If not hired, based on the report, I understand I have rights under FCRA laws including the right to review my report and correct errors.

Signed _____ Dated _____ CA Residents: Check here to receive report. _____

Client: CMC Properties Ph: 513-984-3030 Attn: Lynn Johnson Return via: ljohnson@cmcproperties.com

Level 1: Indent, Multi, 1 County MVR Prior County All Prior Counties IDTrace GBI

OH Crim Comp KY Pre-Trial IN State Police Vanti-National