

# Reliant Holdings, Inc.

## Employment Application \_\_\_\_\_

Reliant Holdings, Inc. is an Equal Opportunity Employer which does not discriminate on the basis of race, color, religion, sex, marital status, national origin, ancestry, protected age, sexual orientation, any disability which does not prevent safe performance of essential job functions, veteran's status, or other protected classifications or activities. It is company policy to engage in an interactive process with a job applicant or employee who has a disability as defined by the Americans with Disabilities Act to identify a reasonable accommodation that will enable him or her to perform the essential functions of the job. The Company further accommodates the religious beliefs of its employees. If, because of a disability, you need accommodations in completing this application or to participate in the interview, please notify the person who gave you this application.

<p><b><i>Office use only</i></b></p> <p>Interviewed by _____</p> <p>Approved for hire by _____</p> <p>Training date and time ____ / ____ / ____ : ____ A.M.P.M.</p> <p>Working schedule _____</p> <p>Member Services Applicant ____ Other _____.</p>
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Application date \_\_\_\_\_

**Personal Information**

Name \_\_\_\_\_  
                            **First**                                    **Middle**                                    **Last**

Email Address \_\_\_\_\_

Address \_\_\_\_\_

Current phone number \_\_\_\_\_

Position(s) for which applying \_\_\_\_\_

Salary requirement \_\_\_\_\_

Have you applied for employment with Reliant Holdings, Inc. in the past?   Yes    No

If yes, when? \_\_\_\_\_

Have you been employed by Reliant Holdings, Inc. in the past?                    Yes    No

If yes, when? \_\_\_\_\_

Social Security Number \_\_\_\_\_

**Are you permitted to be employed in the United States legally?**            Yes    No  
(Proof of such permission will be required upon employment.)

**Are you at least 18 years old?**    Yes    No  
(If under 18, hire is subject to verification that you are of minimum legal age.)

**Do any of your friends or relatives currently work here or have they applied here?**   Yes    No

**If yes, please list name(s) and relationship(s)** \_\_\_\_\_

**Reliant Holdings, Inc. employees and trainees are required to participate in payroll direct deposit. An employee's pay is deposited directly into his or her bank account on each pay day. I acknowledge that I must provide banking information my first day of employment. Signature** \_\_\_\_\_

**I am available to work any schedule including days, evenings, weekends and holidays:** Yes    No

**If no, Hours Available**

	M	T	W	TH	F	SA	SU
<b>From:</b>							
<b>To:</b>							

**I am available to work overtime when requested:** Yes    No

If no, please explain why:

**I grant to Reliant Holdings, Inc. its representatives and employees the right to take photographs of me in connection with my position at the company. I authorize Reliant Holdings, Inc. its assigns and transferees to copyright, use and publish the same in print and/or electronically.**

**I agree that Reliant Holdings, Inc. may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes as publicity, illustration, advertising, and web content.**

School	Address	# Of years Completed	Degree Awarded
High School _____	_____	_____	_____
Trade School _____	_____	_____	_____
College/graduate _____	_____	_____	_____
Postgraduate _____	_____	_____	_____

State any additional education or other information that might be helpful in considering your Application:

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### Employment History

1. Company \_\_\_\_\_ Supervisor \_\_\_\_\_

Position \_\_\_\_\_ Dates of employment \_\_\_\_\_ to \_\_\_\_\_

Address \_\_\_\_\_ Phone number \_\_\_\_\_

Reason for leaving \_\_\_\_\_ Salary \_\_\_\_\_
2. Company \_\_\_\_\_ Supervisor \_\_\_\_\_

Position \_\_\_\_\_ Dates of employment \_\_\_\_\_ to \_\_\_\_\_

Address \_\_\_\_\_ Phone number \_\_\_\_\_

Reason for leaving \_\_\_\_\_ Salary \_\_\_\_\_
3. Company \_\_\_\_\_ Supervisor \_\_\_\_\_

Position \_\_\_\_\_ Dates of employment \_\_\_\_\_ to \_\_\_\_\_

Address \_\_\_\_\_ Phone number \_\_\_\_\_

Reason for leaving \_\_\_\_\_ Salary \_\_\_\_\_

**Personal History:**

Have you ever been convicted of a crime in the State of Pennsylvania or any other State? **Yes** **No**

If yes, list all (indicate Misdemeanor or Felony):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If yes, state the nature of the crime(s), when and where convicted, and the disposition of the case: \_\_\_\_\_

\_\_\_\_\_

**Note:** No applicant will be denied employment solely on the grounds of a conviction of a criminal offense. The nature of the offense, the date of the offense, the surrounding circumstances, and the relevance of the offense to the position(s) applied for may however, be considered. I understand that Reliant Holdings, Inc. is prohibited from employing persons with certain convictions in any capacity involving charitable solicitations and that if I have been convicted of such a crime and I am hired anyway, or if I am convicted of such a crime during my employment, I will not be permitted to do charitable solicitations and my inability to do so may affect my employment.

**Are you currently on probation or parole as a result of the conviction(s) identified above? Yes No**

If so, when is it due to end? \_\_\_\_\_

By my signature below, I state that the information provided in this employment application is true and correct. I understand that any false information or significant omissions may disqualify me from further consideration for employment, and may be justification for my dismissal from employment if discovered at a later date. I agree to immediately notify RHI if I should be convicted of a felony or any crime involving dishonesty while my job application is pending.

I authorize the investigation of all statements contained in this application. I also authorize RHI to contact past employers and listed references. I authorize any person, school, current employer, past employer(s), agency, and organization named in this application form to provide RHI with relevant information and opinion that may be useful to RHI in making a hiring decision, and I release such persons and organizations from any legal liability in releasing such information or making such statements.

During the course of the employment screening and selection process, RHI may make available certain information which it deems to be proprietary to its business and seeks to maintain as confidential. This information includes but is not limited to client lists, billing procedures, business plans, financial data, management information systems, suppliers, prospective client lists, and information regarding the general operation of RHI's business, whether the information is a legally recognizable trade secret or not (the "Information"). It is agreed that such Information is a valuable, special, and unique asset of RHI and that its disclosure or unauthorized use would cause RHI irreparable harm. The applicant hereby agrees not to reveal such Information or any part of it to any person, partnership, corporation, or other entity both during and after the employment screening and selection process in perpetuity. The parties agree that this confidentiality agreement is given in exchange for consideration of employment by RHI.

I understand and agree that, if I am hired, my employment is for no definite period of time and may, regardless of the date of payment of my wages or salary, be terminated at any time for any reason. I understand that neither this document nor any other document(s) or letters received by me during my employment, nor any offer of employment from the Company nor any statement made by any Company agent or representative, constitutes an employment contract unless a specific document to that effect is executed in writing by the Chairman or President of RHI and me. I have not relied and will not rely on any oral or written statements to the contrary.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Full name (Printed)