JMSH L.L.C.

Employment Application

Date of Application: _____   Email: _____

Name (Print) _____ Social Security # _____
(Optional)
Position (s) applied for _____ Telephone # (s) _____

Mailing Address _____

Are you available to work   [ ] Full-time   [ ] Part-time   [ ] Temporary   [ ] Casual

Are you currently employed?   [ ] Yes   [ ] No

Did we previously employ you? [ ] Yes   [ ] No If yes, state when & final position _____

Are you at least eighteen (18) years old?   [ ] Yes [ ] No

Have you ever been convicted of a Felony within the last seven (7) years? If yes, please explain
Conviction will not necessary disqualify an application from employment.
_____

Have you ever been dismissed or forced to resign from any employment? [ ] Yes [ ] No
If yes, please explain _____

Do you have any friends/relatives who work for our company?
If yes, who and where do they work? _____

How did you hear about our job opening (s)? _____
If employment is offered, can you submit proof of your eligibility to work in the U.S.A? [ ]Yes [ ] No

If your application is considered favorably, on what date will you be available to start? _____

JMSH L.L.C. is an Equal Opportunity Employer/AAP

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of non-job related medical condition of disability, or any other legally protected status. Please advise us if any accommodation is needed to participate in the application process.

Work Experience (Start with your current to last job. Include any job-related military service assignments and volunteer activities. You may exclude any organizations that may indicate your race, color, religion, gender, national origin, disabilities or other protected status).

1. Organization _____   From _____/_____/_____ To _____/_____/_____

    Address _____   Start pay _____ Last Pay _____

    _____   Job Title(s) _____

    Telephone Number (s) _____   Work Performed_____

    Name of Supervisor _____   Reason for Leaving _____

2. Organization _____   From _____/_____/_____ To _____/_____/_____

    Address _____   Start pay _____ Last Pay _____

    _____   Job Title(s)_____

    Telephone Number (s) _____   Work Performed_____

    Name of Supervisor _____   Reason for Leaving _____

3. Organization _____   From _____/_____/_____ To _____/_____/_____

    Address _____   Start pay _____ Last Pay _____

    _____   Job Title(s)_____

    Telephone Number (s) _____   Work Performed_____

    Name of Supervisor _____   Reason for Leaving _____

4. Organization _____   From _____/_____/_____ To _____/_____/_____

    Address _____   Start pay _____ Last Pay _____

    _____   Job Title_____

    Telephone Number (s) _____   Work Performed_____

    Name of Supervisor _____   Reason for Leaving _____

If you need additional space, please continue on a separate sheet of paper.

Education (Please indicate education or training which you believe qualifies you for the position you are seeking).

High School: Number of years completed (circle one)   1   2   3   4

Diplomas [ ] Yes [ ] No   GED [ ] Yes [ ] No

School (s) _____   City/State: _____

College and/or Vocational School: Numbers of years completed (circle one)   1   2   3   4

School (s): _____   City/State: _____

Major: _____   Degree or Earned: _____

Other Training or Degree (s): _____

School (s): _____   City/State: _____

Course (s): _____   Degree or Certificate Earned: _____

Special Skills or Training

Computer (s): _____   Type of Software (s): _____

Trade or Apprentice Training(s): _____

Language Abilities (Please tell us about the language (s) you speak, read and/or write. Noting Excellent, Good, and Fair).

Language (s): _____   Spoken: _____   Read: _____   Write: _____

_____   _____   _____   _____

_____   _____   _____   _____

References

Give the name, address, and telephone number of three references that are not related to you and are not previous employers.

1. _____   _____   _____

2. _____   _____   _____

3. _____   _____   _____

Applicant's Acknowledgement

I certify that the information I have provided on this application form is true and complete to the best of my knowledge. I authorize investigation of all information contained in this application for employment that may be necessary in making any employment decision.

I acknowledge that employment with JMSH L.L.C. is of an "At Will" nature. I understand that I may resign at any time without giving notice or reason and JMSH L.L.C. may release me at any time without giving me notice or reason. I further understand that this "At Will" employment relationship may not be changed except unless specifically authorized in writing by the principal executive of JMSH L.L.C.

I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, that if hired, I will be required to abide by all policies, rules and regulations of JMSH L.L.C.

Signature of Applicant: Date:

Authorization &Release of Liability

I authorize JMSH L.L.C. to make an investigation of my personal, educational, and financial or employment history and authorize any former employer and any other person, firm, corporation, institution or government agency to provide JMSH L.L.C. any information they may have about me. In consideration of JMSH L.L.C. review of my application for employment, I release JMSH L.L.C and all providers of information from any liability as a result of furnishing or receiving this information.

Signature of Applicant: Date:

For Personnel Department Use Only

Screening Date: _____   Arrange Interview? [   ] Yes [   ] No   Date: _____ Time: _____

Remarks: _____

Job Title: _____   Rate: Hourly   Salary_____

Status: _____   Date: _____   Date authorized to start work: _____

Approved: Date: