

FOR EMPLOYER USE ONLY:

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.

R. S. K. Corporation, d/b/a Victor Distributing Company, is committed to a policy of Equal Employment Opportunity and will not discriminate against an applicant or employee on the basis of race, color, religion, creed, national origin or ancestry, sex, age, physical or mental disability, veteran or military status, genetic information, sexual orientation, marital status, or any other legally recognized protected basis under federal, state or local laws, regulations or ordinances. 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 terms of 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 Victor Distributing Company. Please inform the company's personnel representative if you need assistance completing any forms or to otherwise participate in the application process.

GENERAL INFORMATION

Full Name	MIDDLE	LAST	Date			
AddressSTREET		CITY	STATE	ZIP CODE		
	Date of Birth:	Driver's I	License #:			
Contact Number ()	Contact Number () Date available for work					
Alternate Contact Number	Alternate Contact Number () E-mail					
Are you legally authorized to work in the United States?						
How were you referred to Victor Distributing Company?						
POSITION INFORMATION						
Type of work desired? _		alary range expected	d (required)	_		
Applying for:	☐ Full-time ☐ Part-time	me	asonal			

EDUCATION

	l	EDUCATION					
Type of School	School Name and Location	Highest Grade Completed	Grade Point Average	Course of Study or Major			
High School or	and Bookhon	9 10 11 12/GED	Tiverage	or major			
G.E.D. equivalent							
College or		1 2 3 4					
University Vocational or							
Trade School							
Graduate School							
Other (including military training)							
List any work related	d certifications or licenses you cur	rently possess.					
	BACKGROUND INFORMATION						
	During the past seven years, have you ever been discharged, 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 name.							
	PDOFFCC	IONIAL DEFE	DENIOEC				
		IONAL REFER					
1	List three professional references (other than those listed as current/former supervisor) that we may contact:						
Name		e No. (<u>)</u>					
E-mail Address Type of			Acquaintance	_			
Name		Telephone	hone No. ()				
E-mail Address Type o			f Acquaintance				
Name Teleph			hone No. ()				
E-mail Address			Type of Acquaintance				
EMPLOYMENT RECORD List all employment experience for the past seven years, starting with the most recent or present employer, including US Military Service. Using a separate section for each position, describe in detail all work experience including periods of							
unemployment. You may include as part of your employment history any verified work performed on a volunteer basis. Resumes may not be substituted in lieu of completing the following employment information.							
Current Employer _			Phone ()				
Geographic Location			From	th Year			
Your Position	Title		Mont	tn Year			
May we contact?	Yes No If not, wh	v?	Mon	th Year			
	ties			ng			

Employer	Phone ()			
	From			
Geographic Location	From Month Year			
Your Position				
Supervisor's Name/Title	To Month Year			
	Month Year			
Primary responsibilities	Reason for Leaving			
-				
Employer	Phone ()			
Geographic Location	From			
Vous Decition	From Month Year			
Your Position	To William Teal			
Supervisor's Name/Title	To Month Year			
Primary responsibilities	Reason for Leaving			
	+			
Employer	Phone ()			
Geographic Location	From			
Your Position	Month Year			
Supervisor's Name/Title				
Supervisors runner rune	To Month Year			
Duimour, nomencibilities				
Primary responsibilities	Reason for Leaving			
·	-			
Have you worked for this company before?	Have you worked for this company before?			
1 7				
Yes No If yes, at what location? Job title:				
Have you signed or otherwise agreed to any non-solicitation, non-compet				
employer? Yes No If yes, explain:				
Please account for any gaps of employment.				
	·			
ADDITIONAL COMM	MENTS			
Please comment on how your prior education and experiences qualify you				
Detail any past responsibilities and achievements. Note any special course	ework, honors, activities, special projects or any			
other information that will assist us in considering your application for en	nployment.			
DI FACE DEAD CADEFULLY AND INITIAL FACE	L DADACDADIL DEFODE CICAUNIC			
PLEASE READ CAREFULLY AND INITIAL EACH	1 PARAGRAPH BEFORE SIGNING			
I have disclosed all information that is relevant and should be considered applicab	ble to my candidacy for employment.			
	Initials			
I understand, where permissible under applicable state and local law, I may be	e subject to a pre-employment drug test after receiving a			
conditional offer of employment, and must receive a negative result for illegal				
Victor Distributing Company.				
5 . ·	Initials			
The desired advances and the second s				
I understand, where permissible under applicable state and local law, I may be				
receiving a conditional offer of employment, and must meet the qualifications for	r the position, with or without reasonable accommodation,			
before being permitted to commence work with Victor Distributing Company.				

Applicant's signature Date
MY SIGNATURE IS EVIDENCE THAT I HAVE READ AND AGREE WITH THE ABOVE STATEMENTS.
Note: An offer of employment is conditioned upon complying with Victor Distributing Company's requirements including, but not limited o, signing a consent to conduct a background investigation.
certify that all of the above information is true and complete, and I understand that any falsification or omission of information may lisqualify you from further consideration for employment or, if hired, may result in termination regardless of the time elapsed before liscovery.
change in any policy, procedure, benefit or other terms or condition of employment other than in a document signed by the Director of Human Resources or an authorized representative. Initials
understand that no representation, whether oral or written, by any representative or agent of Victor Distributing Company, at any time, can constitute an implied or express contract of employment. I further understand no representative or agent of Victor Distributing Company has the authority to enter into an agreement for employment for any specified period of time or to make any
expressly understand and agree that, if employed, my employment, having no specified term, is based upon mutual consent and may be terminated at will, with or without cause, by either party (Victor Distributing Company or me) without prior notice to the other, unless otherwise prohibited by law.
Initials
hereby certify that, if employed, I will report to my supervisor, a representative of HR or other member of management, if I am ever arassed by someone in the company or if I ever become aware of any unethical behavior by any employee.
hereby certify that, if employed, my employment with Victor Distributing will not violate any non-solicitation, non-competition or other imilar covenant or agreement I have with any of my prior employers, other than those I have disclosed in this application, if any.
preach of, or default under, any contract, agreement or understanding that I am a party to or am bound by, other than those I have disclosed in this application, if any. Initials
Initials hereby certify that, if employed, my employment with Victor Distributing Company will not conflict with, or result in the violation of
understand employment with Victor Distributing Company is also contingent on my providing sufficient documentation necessary to establish my identity and eligibility to work in the United States.
contact my prior employers and all others (with the exception of my current employer, only if I have marked "May we contact?" on page 3 of this application as "No") for the purpose of verification of the information I have supplied and release same from any liability resulting from the information released. I authorize employers, schools and other persons named on this application to provide any information or ranscripts requested. Initials
hereby certify that the information given by me is true in all respects. I authorize Victor Distributing Company and its representatives to
Initials
understand, where permissible under applicable state and local law, I may be subject to a pre-employment background check after eceiving a conditional offer of employment to investigate my criminal background, driving record, credit history and other matters related o my suitability for employment.
Initials