



Texsun Pools & Spas, Inc. Employment Application

Instructions

Please Answer All Applicable Questions: Resumes are not accepted in lieu of completion of this application. Note: This document was designed to be used with several types of positions. Some questions may not be completely applicable to the job/position you are seeking; however, we ask that you fully complete all areas of information.

Application Information

Date

First Name

Last Name

Address

City

ST

Zip

E-mail Address

Phone

Which position are you applying for?

Are you under the age of 18?

Yes

No

Note: If Yes, you may be required to furnish proof of exemption or partial waiver as detailed by your State Child Labor Law

Have you previously filed an application with this company?

Yes

No

If Yes, Give Date

Have you previously been employed by this company?

Yes

No

If Yes, Give Date

Please list any relatives or friends who are employed at this work site and their relationship to you.

Do you have a legal right to work in the United States?

Yes No

Date Available to Work

Note: You will be required to provide appropriate document(s) for completion of the I-9 at the time of employment.

Type of employment desired:

Full-Time

Temporary

Seasonal

Education Co-op

Do you have a reliable means of transportation (enabling you to be at work as required?)

Yes No

Will you be willing to work overtime if asked? Yes No

Will you be able to work evenings? Yes No

If required are you able to travel? Yes No

Are there any hours, shift you will not work? Yes No

If you answered yes to the question above, please explain in the space given below.

Skills and Qualifications

Summarize any training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

Other Languages: (Please indicate if read, written or spoken)

Do you have a valid driver's license?

Yes

No

If yes, Driver's License #:

Class

State

Expiration

A

B

C

D

Education

High School	No. Years Completed	Degree Y/N	Major Course of Study
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Print Name, Number & Street, City, State and Zip Code for each

College	No. Years Completed	Degree Y/N	Major Course of Study
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Print Name, Number & Street, City, State and Zip Code for each

Graduate School	No. Years Completed	Degree Y/N	Major Course of Study
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Print Name, Number & Street, City, State and Zip Code for each

Trade, Bus. Night	No. Years Completed	Degree Y/N	Major Course of Study
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Print Name, Number & Street, City, State and Zip Code for each

References

First Name

Last Name

E-mail Address

Phone

First Name

Last Name

E-mail Address

Phone

First Name

Last Name

E-mail Address

Phone

Employment Experience

List your last three previous Employers (most recent first). Account for all time periods including unemployment, self-employment and military service. This section must be completed in full in addition to any attached resume.

Employer

Start Date

End Date

Address

Job Title

Hourly Rate/
Salary Start

Hourly Rate/
Salary End

Immediate Supervisor

Telephone Number

Work Performed

Reason For Leaving

Employer

Start Date

End Date

Address

Job Title

Hourly Rate/
Salary Start

Hourly Rate/
Salary End

Immediate Supervisor

Telephone Number

Work Performed

Reason For Leaving

Please provide an explanation for any lapse of employment.

Have you ever been dismissed or forced to resign from an employment?

APPLICATION FOR EMPLOYMENT

By submitting this application or other documents, I agree to conform to the rules and regulations of the Company, including an Introductory Period (if applicable). I certify that the information provided in this Application for Employment is correct and complete. I authorize the investigation of this information and give permission for the Company, or their designated representatives to contact schools, previous employers, personal references and others to verify the data I have supplied. I release and indemnify the Company from any claims or liability resulting from such inquiry. In addition, I release the schools, my previous employers, and other individuals from all liability as a result of responding to such inquiries. I understand that my misrepresentation, omission of fact(s), or incomplete information may disqualify me for employment with the Company. In addition, if I am employed by the Company, any discovery of misrepresentation or omission of fact(s) on this Application for Employment following my employment may result in discipline up to and including termination.

I understand and agree as a condition of continued employment that I will be required to take a drug and/or alcohol test as part of any work related accident investigation.

I understand that employment with the Company is for no guaranteed period of time and may be terminated by myself, the Company with or without notice. I acknowledge that any promise, policies, business practices, procedures, or documents (including the Company's Employee Handbook) do not constitute an employment contract or modification of the at-will employment relationship between Company and myself.

• **Note:** Complete details of the Company's Drug Free Workplace Policy (if any) will be provided during the interview process.

THE COMPANY'S STATEMENT

The Company complies with the Americans with Disabilities Act of 1990. During the interview process, you may be asked questions regarding your ability to perform job-related responsibilities. If the Company extends an offer of employment to you, you may be required to complete a post-job offer medical history questionnaire and/or undergo a medical examination or drug screening.

The Company is an equal employment opportunity employer. It is the policy of the Company to make employment decisions without regard to race, color, religion, sex, age, national origin disability, sexual orientation, marital status or any other protected category.

Applicants who are accepted for employment with the Company should understand that while every effort is made to provide continuous work, there are no employment contracts and the permanency of any position is not guaranteed.

FAIR CREDIT REPORTING ACT NOTIFICATION

You are notified that in connection with your application for employment (including contract for services) and/or active employment with the Company, a consumer report and/or investigative report which may contain public record information may be requested and/or made on you. This report may include consumer credit, criminal records, driving records, education history, prior employer verification and other information for the purpose of considering you for employment, promotion, reassignment or retention with the Company.

These reports may include information regarding your career experience along with reasons for termination of past employment, information regarding your character, reputation, personal characteristics and/or mode of living and will be obtained from public or private record sources or through personal interviews. Information may also be requested from various Federal, State, local or other agencies.

Before a consumer and/or investigative report is requested, you will be asked to complete a Disclosure and Consent Form. You will be provided the name and address of the consumer-reporting agency to which the request for information is being made. You will have the right to a complete disclosure of the nature and scope of the investigation and a written summary of your rights under the Fair Credit Reporting Act.