3D Tech, LLC Application for Employment

Directions: Please complete the application in detail

At 3D Tech, LLC. we do not discriminate with respect to race, color, religion, sex, sexual orientation, national origin, ancestry, physical or mental disability, marital status, citizenship status (except as required by law), age, status as a special disabled veteran or Vietnam-era veteran, or any status protected by applicable law. We provide reasonable accommodations for limitations associated with disabilities. Our equal employment opportunity philosophy applies to all aspects of employment including, but not limited to, recruiting, hiring, promotion, training, benefits, pay, discipline, termination, educational assistance, rules, policies and company-sponsored social and recreational activities.

Personal Information

Date Social Security Number	Date Available
Name	
Home Telephone ()	Daytime Telephone ()
Current Address	
Email Address	
Are you 18 years of age or older? Yes No	DOB
List any other names(s) under which you may have been known	own by persons or organizations included in this application:
Name	Dates
Name	Dates

Position Desired

Position Title		Loca	tion
Full-Time	Part-Time	Temporary	Internship
Have you previously been emp	loyed by 3D Tech, LI	C. or one of its affiliates?	
Yes No Dates			
Are you legally authorized to w	vork in the United State	es? Yes No	
If hired, you will be required, w	vithin three business da	sys, to submit proof of identity and e	ligibility for employment in the
United States.			
How were you referred to 3D T	Tech, LLC ?		
Salary expected?			

Professional References

List three individuals you have known for at least three years who are not related to you and who are familiar with your work.

Name	Company	Phone	Years Known
Name	Company	Phone	Years Known
Name	Company	Phone	Years Known

Work History

List all positions you have held in the last 10 years, whether as an employee, temporary worker, consultant, member of the military, independent contractor or owner. Start with present or most recent position. If additional space is needed to provide a complete response, attach an additional sheet.

Name of Employing Entity			
Address			
Name and Title of Manager			
Dates of Employment From	То	Phone	May we contact?
Position(s) Held		_ Starting Salary \$	Final \$
Other Compensation			
Description of Duties (if resume is not attached)			
Reason for Leaving			
Name of Employing Entity			
Address			
Name and Title of Manager			
Dates of Employment From	_ To	Phone	May we contact?
Position(s) Held		Starting Salary \$	Final \$
Other Compensation			
Description of Duties (if resume is not attached)			
Reason for Leaving			
Name of Employing Entity			
Address			
Name and Title of Manager			
Dates of Employment From	To	Phone	May we contact?
Position(s) Held		Starting Salary \$	Final \$
Other Compensation			
Description of Duties (if resume is not attached)			
Reason for Leaving			
Name of Employing Entity			
Address			
Name and Title of Manager			
Dates of Employment From	To	9 Phone	May we contact?
Position(s) Held		Starting Salary \$	Final \$
Other Compensation			
Description of Duties (if resume is not attached)			
Reason for Leaving			

Education

List high school and all other educational institutions attended since high school. Attach an extra sheet of paper if necessary.

High School

Name and Location:

Course/Major:_____

Degrees/Diplomas:_____

College

Name and Location:

Course/Major:_____

Degrees/Diplomas:_____

College

Name and Location:

Course/Major:_____

Degrees/Diplomas:_____

Post Graduate

Name and Location:

Course/Major:_____

Degrees/Diplomas:_____

Post Graduate

Name and Location:

Course/Major:_____

Degrees/Diplomas:

Business Trade

Name and Location:

Course/Major:_____

Degrees/Diplomas:

Convictions

Have you ever been convicted of a felony that has not been expunged or otherwise removed from your record?

Yes _____ No _____

If yes, please explain fully. This information will not necessarily bar an applicant from employment.

Other Qualifications:

Please summarize additional training, such as correspondence courses and in-company courses:

Machines or equipment that you operate: (Please include those that are relevant to the position for which you are applying).

Computer software knowledge: (Please include those that are relevant to the position for which you are applying).

(Please answer this question ONLY if driving is required for the position for which you are applying.)

Do you have a valid driver's license?

Yes _____ No _____

If yes, what is the license number?

_____ State_____

List any moving violations during the last five years.

List any special licenses and/or certificates. (Please include those that are relevant to the position for which you are applying.)

Additional Questions

Have you ever been placed on probation, suspended, demoted, terminated or asked to resign from any position in which you worked?

Yes _____ No _____ (If yes, please attach a separate sheet explaining the circumstances.)

Professional or Service Organizations				
Organization	Offices/Committees/Participation			

Applicant's Certification – Please Read Carefully

I certify that the facts contained in this application are correct and complete to the best of my knowledge and belief. I further understand that, if employed by the organization, any incomplete or falsified statements or misrepresentations on this application shall be grounds for dismissal no matter when discovered or regardless of whether the accurate information would have been grounds for disqualification.

I authorize the investigation of my past employment, educational credentials, and other employment-related activities. I agree to cooperate in such reference checks and hereby release those parties supplying such information to the company from all liability or damage that may result from furnishing such information.

I understand that as a condition of employment, I may be required to take and successfully pass a physical examination, including drug abuse screening after I am made an offer.

I understand that if I am hired, I will be required to provide documents verifying my identify and eligibility to work in the United States, under the provisions of the Immigration Reform and Control Act of 1986.

I understand that as this organization deems necessary, I may be required to work overtime hours or hours outside a normally defined workday or workweek.

I understand that nothing in this employment application, in the company's policy statements or personnel guidelines, or in my communications with any company official is intended to create an employment contract between the company and me. I also understand that the company has the right to modify its policies without giving me any notice of the change. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the company unless it is made in writing and signed by a company officer. I understand that any employment with the company is not for any fixed period of time and may be terminated at any time without cause or notice and that I may resign at any time for any reason.

I agree to sign a Confidentiality Agreement as a condition of employment and to be bound by the terms of the Agreement.

I also understand that if employed, I will be required to comply with all policies and procedures that the organization may from time to time adopt during my employment.

Date: _

_____ Signature: _____

This application is effective for 30 days for the positions indicated. Consideration for employment after 30 days or for other positions requires a new application.