

Please print name and social security exactly as they appear on your social security card.

Name (Last)	(First)	(M.I.)	(Social Security #)	Foremost Staffing, Inc. 4100 International Plaza Suite 620 Fort Worth, TX 76109 Phone: (817) 346-4738 Fax: (817) 346-7040
Address (Street)			(City, State, Zip)	
Mailing Address (if different)			(City, State, Zip)	
Home Phone #	Cell Phone #	Email Address		Are you at least 18 years old? <input type="checkbox"/> Yes <input type="checkbox"/> No
Emergency Contact and number			How did you hear about us?	

WORK HISTORY - Please List All **Full- or Part-Time** Regular Employment. Begin with most recent.

DATES	EMPLOYER NAME & ADDRESS	TITLE/DEPT. SUPVR	Pay Rate	DESCRIBE MAJOR DUTIES	REASON LEAVING
From Month/Yr.	Phone: () Type of Business	Title/Dept:	\$		
To Month/Yr.		Supervisor:			
<input type="checkbox"/> Full Time or <input type="checkbox"/> Part-Time					
From Month/Yr.	Phone: () Type of Business	Title/Dept:	\$		
To Month/Yr.		Supervisor:			
<input type="checkbox"/> Full Time or <input type="checkbox"/> Part-Time					
From Month/Yr.	Phone: () Type of Business	Title/Dept:	\$		
To Month/Yr.		Supervisor:			
<input type="checkbox"/> Full Time or <input type="checkbox"/> Part-Time					
From Month/Yr.	Phone: () Type of Business	Title/Dept:	\$		
To Month/Yr.		Supervisor:			
<input type="checkbox"/> Full Time or <input type="checkbox"/> Part-Time					

EDUCATION: Circle highest grade completed	Circle highest degree completed	Circle highest degree completed
High School: 9 10 11 12 DIP GED	College: 1 2 3 4 AA BA BS	Post Grad: MA MS MBA JD PhD
Location:	School Attended:	School Attended:
	Area of study:	Area of study:
Other degrees:	Degree:	Degree:
Other certificates:	Attended from: to:	Attended from: to:

Are you currently using illegal drugs? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have friends or relatives working for us? <input type="checkbox"/> Yes <input type="checkbox"/> No If so, list names:
Have you ever been convicted or subject to deferred adjudication on a criminal offense? <input type="checkbox"/> Yes <input type="checkbox"/> No If "Yes". Explain in detail on a separate sheet of paper if needed. A conviction may not disqualify you, but a false statement will.	

APPLICANT'S CERTIFICATION AND AGREEMENT

I certify that all of the information provided by me on this application and all other information provided by me in the course of applying for employment by Foremost Staffing, Inc. (FOREMOST) is true and accurate. I understand that any false statement, omission of fact, or misrepresentation of facts on this application or other forms provided by FOREMOST will be grounds for denial of employment and/or termination.

I authorize FOREMOST to contact and obtain information, personal or otherwise, from all references, employers or educational institutions and to otherwise verify the accuracy of the information provided during the application process. I release FOREMOST and its agents, and all other parties or persons from whom information has been sought as a part of this investigation, from all claims, liabilities and damages arising out of this investigation or the furnishing of such information to FOREMOST.

If employed, unless otherwise prohibited by law, I agree that if at any time I make claims against FOREMOST for personal injuries, upon request, I will submit myself to examination by a physician or physicians of the Company's selection as often as may be requested.

I also understand that if I am offered and accept employment with FOREMOST, my terms of employment are "at will" which means my employment can be terminated at any time with or without notice or cause.

If employed, I agree to observe all of FOREMOST's rules and regulations stated in the FOREMOST New Employee Information Brochure.

I understand and agree that if I am employed by FOREMOST, I will not seek or accept employment either directly or indirectly from any customer of FOREMOST to whom I have been assigned to work for at least three months after the last date that I was assigned to work in the establishment of said customer or had contact with said customer's working supervisor in the course of my employment with FOREMOST, unless authorized in writing by FOREMOST.

As a condition of employment with FOREMOST, you must provide documentation to prove both identity and employment eligibility as required by the Immigration Reform & Control Act of 1986.

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, veterans status, or the presence of a non-job related medical condition or disability.

Date Signature

Have you applied with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Hourly pay minimum: \$	Availability: <input type="checkbox"/> Direct Hire <input type="checkbox"/> Temp to Hire <input type="checkbox"/> Temporary	
Hourly pay desired: \$		
Shifts: <input type="checkbox"/> 1st <input type="checkbox"/> 2nd <input type="checkbox"/> 3rd <input type="checkbox"/> Other:	<input type="checkbox"/> Mon <input type="checkbox"/> Tue <input type="checkbox"/> Wed <input type="checkbox"/> Thur <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun	
Hours available to work:		
Date Available to Begin work _____ <input type="checkbox"/> Same Day Assignment <input type="checkbox"/> Available Immediately Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	Type of Work Desired:	Transportation: <input type="checkbox"/> Car <input type="checkbox"/> Bus <input type="checkbox"/> Other: _____
What should we do with your paycheck?	<input type="checkbox"/> Hold <input type="checkbox"/> Mail <input type="checkbox"/> Direct Deposit <input type="checkbox"/> Other <input type="checkbox"/>	

FOR INTERNAL USE ONLY	Drug/ Security/Other	Security Clearance: <input type="checkbox"/> Yes <input type="checkbox"/> No
Drug and Alcohol Screening:	<input type="checkbox"/> Willing <input type="checkbox"/> Not Willing	Hiring Information: Hire Type: Temp <input type="checkbox"/> Temp to Perm <input type="checkbox"/> Direct Hire <input type="checkbox"/> Payroll Svc <input type="checkbox"/>
Hire Status: Eligibility?	Orientation Date: _____	I-9 Completed Date: _____

In the last year, have you accepted temporary work from any other staffing companies? Yes _____ No _____

If "Yes," complete the following:

Name of Staffing Company	Name of Client Assigned To	Types of Assignments	Length of Assignments	Staffing Supervisor Name/Phone #

Why are you looking for temporary work?

(LG) Please check any of the following languages you are able to speak/read/write:

English: Fluent (00) _____ Read (01) _____ Speak (02) _____ Write (03) _____

Spanish: Fluent (04) _____ Read (05) _____ Speak (06) _____ Write (07) _____

Other: Fluent (08) _____ Read (09) _____ Speak (10) _____ Write (11) _____ (What language? _____)

(GE) Please check any areas you are willing to work:

Alliance (00) _____ Arlington (01) _____ Dallas (02) _____ Fort Worth-North (03) _____ Fort Worth-South (04) _____

Fort Worth-East (05) _____ Fort Worth-West (06) _____ Grand Prairie (07) _____ Grapevine (08) _____ HEB (09) _____

Other (10) _____ (Where? _____)

(SE) Please check any Safety Equipment you currently own:

Steel Toes (00) _____ Hard Hat (01) _____ Gloves (02) _____ Safety Glasses (03) _____ Back Belt (04) _____