EB Clearing, Inc.

Employment Application

EB Clearing, Inc. is an equal opportunity employer. If applicable to company, reasonable accommodation under the American with Disabilities Act will be provided as required by law.



Full Name]
Street Address]
City / State]
Zip Code				
Contact Number		Can you receive t	ext messages]
If hired, can you p legal eligibility to	rovide evidence of Yes work in the U.S.? No			
Do you have a vali Lice	d, current Drivers Yes No			
Position Desired	Laborer Truck D	Personnel	Other	٦
Wage Desired	OperatorOffice i	ersonner]
Гуре of Employment	Full Time Part Tin	ne		
Have you ev	ver been convicted of a crime	e, other than minor t	raffic offenses	_
If yes please explain:				
Date you can begin work				
Are you at least 18 years old	Yes	No	DOB (optional)	
Name of High School Attended]
Graduation Status	Diploma	GED	Other	
Any Additional Schooling Information				

	ny job related mplishments. Military	(Include				
	ave any special ds for a work s					
		<u>R</u>	eference	<u>es</u>		
<u>Name</u>		Contact Number		·	Relationship/Years Known	
		<u>Emplo</u>	yment H	<u> </u>		
		Name and Location of Employer	Salary	Position	Reason for leavi	ing
То:		1 3				
From:						
To: From:						
То:			+ +			
From:						
То:						
From:						

Carefully Read each statement and Initial before signing the bottom

I certify that all of the information provided in this employment application are knowledge, and I authorize investigation of all statements contained in this background and a driving record. I understand that any false or incomplete in further consideration for employment and may result in my immediate disc	application, including a criminal aformation may disqualify me from
I understand and acknowledge that unless otherwise defined by applicable Clearing, Inc., any employment relationship with EB Clearing, Inc., is cons means the employee may resign at any time and the employer may discharge without cause, and with or without advance no	idered "employment at will". This e the employee at any time with or
I authorize the investigation of any or all statements contained in this applica school, current employer, past employers, and other organizations to provide employment and other relevant information that may be useful in making a hi and organizations from any legal liability in making such	information concerning my previous ring decision. I release such persons
Signature	Date