Durand, Inc. 304 Birchfield Drive Mt. Laurel, NJ 08054

APPLI	ICATION FOR I	EMPLOYMENT	 Version 	n July 2019	
to provide equal employment of status, physical or mental disal consider you for a position unlevaluate you as a potential emp	t clearly obtaining a clear understanding opportunity without regard to ra bility, medical condition, vetera less all the requested informatio ployee (such as a resume or lett on active for 30 days after our r	nce, color, religion, sex, pregna n status or sexual orientation. n is provided by you. If you he er of recommendation), please	ncy, national orig Complete all info ave additional inf attach it to the co	in, ancestry, citizenship, agormation on the application; formation that will help us to impleted application. Pleas	we cannot o further
Personal Informati	on				
NAME					
Last	First	Middle		Social Security Numb	per
PRESENT ADDRES	SS				
PERMANENT ADI	Street	Ci	ty State	Zip Code	
PERMANENT ADI	Stree	et Ci	ty State	Zip Code	
PHONE NUMBERS	S ()	()	zip code	FIRST
	Home	\	Cell		
If related to anyone	in our employ, state i	name and department	:		
Referred By:					
EMAIL ADDRESS:					
					=
	m lawfully becoming e	employed in this count	ry because of	f a visa/ immigration	n status?
Yes No					n status?
E 1 (D:	1				<u> </u>
Employment Desire	<u>ea</u>				
POSITION					
100111011					
Can you perform t	he essential function	ns for the job which	eh vou are	applying either	with or without
reasonable accommo	ndation? Ves	No	-		
Date you can start	now? If some Ever app	Pay desired			
Are you employed n	ow? If s	so can we inquire of	vour presei	nt employer?	
Ever work for Durar	nd? Ever an	plied to Durand?	Jour proses		
If so where?	 	If so when?			
How did you hear of	f this opening?	11 50, WIIOII			
110 W did you nour or	s op es				
Education					
			DID YO		
	NAME AND LOCATION	N OF SCHOOL	GRADUA' YES N		GRADE AVERAGE
GRAMMAR SCHOOL		, 01 5011001			TITELLE
					
HIGH SCHOOL					
mon school			<u></u>		
COLLECE					
COLLEGE					
TDADE DIIGINEGG OD					
TRADE BUSINESS OR	1			ĺ	1

CORRESPONDENCE SCHOOL

_	en convicted of a crime? If YES, t from employment.)	please explain. (Convic	tion does not necessaril
	Athletic, etc. (Exclude organizations, color, disability, handicap or national		
Former Employer	s (List below your last four employer	s, beginning with presen	t or most recent.)
DATE (FROM/TO) MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	POSITION REAS LEAV	ON FOR CONTACT ING
	ne name of three persons not related to work references preferably). ADDRESS	o you, whom you have kn BUSINESS/ TELEPHONE NO.	nown at least one YEARS AQUAINTED
COMPANY VEH Do you hold a valid	OR POSITION THAT REQUIRED ICLE MUST COMPLETE THE FOOR driver's license? (YES or NO) se currently revoked in any state? (YES or NO)	OLLOWING	CENSE OR USE OF
	STATEM	ENT	
ication will be reason for me to see for rejection of my application and authorize the	this application are true and complete to the best of my lobe fired. I understand that a false or misleading statemation or may be cause for my employment to be term references listed in this application to give you any info hay result from furnishing that information to you. I acount.	nent or omission during any intervi- inated, if I am hired. I authorize inver- rmation they may have personal or of	ew of me or on this form may be estigation of all statements contained otherwise, and I release all parties fro
al use of drugs during emplordance with Durand's Substatloyment. I am also willing to	nich is referred to in this statement as Durand) prohibits syment. I also understand that the use of alcohol or b nce Abuse Policy, I am willing to submit to drug tes submit to alcohol testing, physical examination, mot t upon maintaining any al all licenses required to work of	eing under the influence of alcohosting to detect use of illegal drugs or vehicle check, and a criminal b	I while at work is also prohibited. prior to and/or during (if I am hire
veen Durand and me. I undersed by the Executive Director	I understand that nothing contained in this application tand that any guarantee, term or benefit shall be valid of Durand. I understand that this entire Statement applich of the above three paragraphs (including this paragraph	only if it is included in an employmenties to the period before and after I in	ent contract for me with Durand that nay become employed. I acknowled
ESIGNAT	JRE		

AFTER COMPLETION, ROUTE TO HUMAN RESOURCES APPLICANT EEO

It is the policy of this organization to provide equal employment opportunity without regard to race, color, religion, sex, pregnancy, national origin, ancestry, citizenship, age, marital status, physical or mental disability, medical condition, veteran status or sexual orientation.

COMPLETION OF THIS FORM IS VOLUNTARY AND IN NO WAY AFFECTS THE DECISION REGARDING YOUR APPLICATION FOR EMPLOYMENT. THIS FORM IS CONFIDENTIAL AND WILL BE MAINTAINED SEPARATELY FROM YOUR APPLICATION FORM.

PLEASE PRINT						
NAME (LAST, FIRST, MIDDLE)	DATE					
POSITION APPLIED FOR (LIST ONLY ONE)						
WHAT IS YOUR RACE/ETHNIC ORIGIN? WHITE						
☐ HISPANIC						
☐ AMERICAN INDIAN/ALASKAN NATIVE	☐ AMERICAN INDIAN/ALASKAN NATIVE					
☐ AFRICAN AMERICAN						
☐ ASIAN/PACIFIC ISLANDER						
WHAT IS YOUR SEX? ☐ MALE						
☐ FEMALE						
HOW DID YOU LEARN ABOUT THIS OPENING?						
□ NEWSPAPER AD (WHERE:)						
☐ EMPLOYMENT AGENCY (NAME:)						
☐ COLLEGE RECRUITING						
☐ STATE JOB SERVICE						
☐ INTERNET						
□ OTHER (PLEASE SPECIFY:)						