

Acecom, Inc. – San Antonio
Employment Application
We are an Equal Opportunity Employer

Position Applied For: _____ **Date of Application:** _____

Location Applied For... Please print Store Name: _____

Name: _____
(Last) (First) (Middle)

Address: _____
(Street) (City) (State) (Zip code)

Phone: _____ **Cell Phone:** _____

Social Security Number: _____

Sex: _____ (Male) _____ (Female) **Date of Birth:** _____

Date Available to Start: _____ **Days available to work:** _____

Type of Employment Desired: _____ (Full Time) _____ (Part Time) _____ (Temporary)

Have you ever been convicted of a crime? _____ (Yes) _____ (No)

If yes, Please Explain: _____

Are you Legally Eligible for Employment in this Country? _____ (Yes) _____ (No)

If you are Under 18, do you have a Work Permit? _____ (Yes) _____ (No)

In Case of Emergency Please Notify: _____
(Name) (Phone)

(Relationship) (Address) (City) (State) (Zip)

Work Experience:

Please give accurate and complete work history information. Include both full time and part time experiences. Be sure to explain dates of unemployment periods. Please start from most recent employer. Attach Resume if you have one with you.

_____ (Company Name)	_____ (Telephone Number)
_____ (Street / Mailing Address)	_____ (City, State, Zip)
_____ (Name of Immediate Supervisor)	_____ (Duration of Employment)
_____ (Job Title)	_____ (Salary / Wages)
Description of Duties: _____ _____ _____	
Reason for Leaving: _____	

_____ (Company Name)	_____ (Telephone Number)
_____ (Street / Mailing Address)	_____ (City, State, Zip)
_____ (Name of Immediate Supervisor)	_____ (Duration of Employment)
_____ (Job Title)	_____ (Salary / Wages)
Description of Duties: _____ _____ _____	
Reason for Leaving: _____	

Work Experience:

_____ (Company Name)	_____ (Telephone Number)
_____ (Street / Mailing Address)	_____ (City, State, Zip)
_____ (Name of Immediate Supervisor)	_____ (Duration of Employment)
_____ (Job Title)	_____ (Salary / Wages)
Description of Duties: _____	

Reason for Leaving: _____	

Educational Background:

School	City / State	Years Attended	Diploma / Degree Received

References:

List the names and telephone numbers of three business / work references who are **NOT** related to you and are **NOT** previous supervisors. If not applicable, please list three schools or personal references that are **NOT** related to you.

Name	Telephone Number	Number of Years Known

Application Statement:

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (I) cancel further consideration of this application or (II) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, or agent to contact and obtain information from all references, employers, public agents, educational institutions and to otherwise verify the accuracy of all information provided by me in the application, resume or job interview. I agree to allow Acecom Inc./InkSell.com to process a background check as needed regarding the position applied for within the company. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representative, for seeking, gathering and using such information in the employment process and all other persons, corporation, or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICATION STATEMENT

I certify that I have read and fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant: _____ Date: _____