



| APPLICANT INFORMATION | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--------------------------------------|----------------|
| We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital, or veteran status, the presence of non-job related medical condition or disability, or any other legally protected status. | | | | | |
| First Name | | M.I. | | Last Name | Date |
| Street Address | | | | Apartment/Unit # | |
| City | | | State | ZIP | |
| Primary Phone | | | Secondary Phone | | |
| Email Address | | | | | |
| Position Applied For (You must submit a separate application for each position you would like to be considered for.) | | | | Desired Minimum Salary | |
| Do you prefer | Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary <input type="checkbox"/> | | # of Hours Preferred | | Date Available |
| How did you Learn about us? | | <input type="checkbox"/> Newspaper Advertisement <input type="checkbox"/> Employment Agency <input type="checkbox"/> Walk- In <input type="checkbox"/> Referral Name: _____ <input type="checkbox"/> Online Ad: SiouxFallsHelpwanted.com <input type="checkbox"/> Online Ad: Argus Leader/Careerbuilder <input type="checkbox"/> Online Ad: Keloland.com <input type="checkbox"/> Online Ad: Other | | | |
| Do you presently have relatives working for us? | | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If yes, give name _____ and relation | |
| Are you 18 years of age or older? | | YES <input type="checkbox"/> | NO <input type="checkbox"/> | | |
| Have you ever worked for this company previously? | | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If so, when? | |
| | | | | Who was your supervisor? | |
| Have you ever been convicted of any crime involving dishonesty or breach of trust such as theft or falsification? (A conviction will not necessarily disqualify you from the position) | | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If yes, explain | |
| Have you been convicted of any felony within the past 10 years? (A conviction will not necessarily disqualify you from the position) | | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If yes, please explain | |

| | | | |
|------------------------------------------------------------------------------------------------------------------|------------------------------|-----------------------------|------------------------|
| Can you, upon employment, provide proof establishing your identity and eligibility to work in the United States? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | |
| Have you ever been discharged or asked to resign from a position? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If yes, please explain |
| Do you have another job that you would like to keep if employed by Generation Direct, Inc.? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | |

| AVAILABLE HOURS | 24/7 | SUNDAY | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY | SATURDAY |
|-----------------|-------|--------|--------|---------|-----------|----------|--------|----------|
| | FROM: | | | | | | | |
| | TO: | | | | | | | |

| EDUCATION | | | |
|----------------------|------------------------------|-----------------------------|--------|
| High School Attended | | Address | |
| Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree |
| College Attended | | Address | |
| Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree |
| College Attended | | Address | |
| Did you graduate? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Degree |

| LICENSES / CERTIFICATIONS | |
|-------------------------------|-------------|
| License/ Certificate | Issued by |
| License/Certification Number: | Date Issued |
| | |
| License/ Certificate | Issued by |
| License/Certification Number: | Date Issued |

| PREVIOUS EMPLOYMENT | | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|------------------------------|-----------------------------|
| PLEASE LIST YOUR CURRENT OR MOST RECENT EMPLOYMENT FIRST AND PREVIOUS EMPLOYMENT THERAFTER. PLEASE COMPLETE THIS SECTION EVEN IF YOU CHOOSE TO ATTACH A RESUME. | | | |
| Company | | Phone () | |
| Address | | Supervisor | |
| Job Title | Starting Salary \$ | Ending Salary \$ | |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? | | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Company | | Phone () | |

| | | | |
|-------------------------------------------------------------------------------------------------------------------|----|--------------------|------------------|
| Address | | Supervisor | |
| Job Title | | Starting Salary \$ | Ending Salary \$ |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |
| Company | | Phone () | |
| Address | | Supervisor | |
| Job Title | | Starting Salary \$ | Ending Salary \$ |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |

| | | | |
|-------------------------------------------------------------------------------------------------------------------|----|--------------------|------------------|
| Company | | Phone () | |
| Address | | Supervisor | |
| Job Title | | Starting Salary \$ | Ending Salary \$ |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |
| | | | |
| Company | | Phone () | |
| Address | | Supervisor | |
| Job Title | | Starting Salary \$ | Ending Salary \$ |
| Responsibilities | | | |
| From | To | Reason for Leaving | |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> | | | |
| Company | | Phone () | |
| Address | | Supervisor | |
| Job Title | | Starting Salary \$ | Ending Salary \$ |

| | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|--------------------|
| Responsibilities | | |
| From | To | Reason for Leaving |
| May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/> | | |
| REFERENCES PLEASE LIST THREE PROFESSIONAL REFERENCES. | | |
| Full Name | Relationship | |
| Company | Phone () | |
| Full Name | Relationship | |
| Company | Phone () | |
| Full Name | Relationship | |
| Company | Phone () | |
| DISCLAIMER AND SIGNATURE | | |
| I understand that an inquiry may be made during the processing of my employment application and that the inquiry may include but not be limited to: academic Background check, employment background check, criminal background check, and character references. Any misleading or incorrect statements may render the application void and would be cause for immediate dismissal in the event of employment. I hereby authorize previous employers and references listed above to release reference information to Generation Direct. Any copy of this signed authorization shall have the full force of the original. I understand and agree that if hired, my employment will be on an at-will basis and may be terminated at any time by either party with or without cause. | | |
| Signature | | Date |

PLEASE SUBMIT YOUR COMPLETED EMPLOYMENT APPLICATION TO:

GENERATION DIRECT
ATTENTION: HUMAN RESOURCES
1520 N Industrial Ave
Sioux Falls, SD 57105