

APPLICATION FOR EMPLOYMENT

An Equal Employment Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

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Answer each question fully and accurately. questions. Use blank paper if you do not for signature on page two of application. the questions are intended to imply illegal pro-	ot have enough room In reading and answe	n on this application. I ering the following ques	PLEASE PRINT or TYPE, except stions, be aware that none of
Job Applied for		Today's	Date:
Are you seeking: Full-time Part-time	<u></u>		you start work?
Last Name First Na	ıme M	liddle Name	Telephone Number
Present Street Address	City	State	Zip Code
Are you 18 years of age or older? (If you are hired, you may be required to submit pro			Yes No 🗆
Social Security # (last 4 digits) XXX-XX	_ If hired, can you furnish	proof you are eligible to wo	rk in the U.S.? Yes No
Have you ever applied here before? Yes	s No If	yes, when?	
Were you ever employed here? Yes	s No If	yes, when?	
Have you ever been convicted of any law vio plea of "guilty" or "no contest." Excluding I			Yes No
If yes, give details (A conviction will not necessarily disqual	lify an applicant for employ	vment.)	
If employed, do you expect to be engaged in or employment outside of our job?	•		Yes No
If yes, give details			
Driving-Related Positions: Do you have a valid o			
Driver's License Number			
Have you had your driver's license su			
List professional, trade, business or civic acti race, color, religion, national origin, sex, age,	ivities and offices held. I	Exclude labor organization	ns and memberships which reveal
LIST NAME AND ADDRESS OF SCHOOL		Number of Years Completed	Diploma, Degree, Subjects and/or Certificate Studies
High School or GED:			
College or University:			
Vocational or Technical:			
What skills or additional training do you have	that relate to the job fo	or which you are applying	?
What machines or equipment can you operat	e that relate to the job f	for which you are applying	g?

including military service	and any periods of unem	present or last employer listed first. Account for all periods nployment. if self-employed, give firm name and supply be ptable references from current and former employers.	
NAME OF EMPLOYER		JOB TITLE AND DUTIES	
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM TO	ı
CITY, STATE, ZIP CODE		PAY: START \$ FINAL \$	
SUPERVISOR(S)	TELEPHONE	Reason For Leaving	
NAME OF EMPLOYER		JOB TITLE AND DUTIES	
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM TO	·
CITY, STATE, ZIP CODE		PAY: START \$ FINAL \$	
SUPERVISOR(S)	TELEPHONE	REASON FOR LEAVING	
NAME OF EMPLOYER		JOB TITLE AND DUTIES	
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM TO	·
CITY, STATE, ZIP CODE		PAY: START \$ FINAL \$	
SUPERVISOR(S)	TELEPHONE	REASON FOR LEAVING	
NAME OF EMPLOYER		JOB TITLE AND DUTIES	
ADDRESS		DATES OF EMPLOYMENT (MO/YR): FROM TO	ļ
CITY, STATE, ZIP CODE		PAY: START \$ FINAL \$	
SUPERVISOR(S)	TELEPHONE	REASON FOR LEAVING	
Have you worked or attended school under any other names? Yes If yes, give names: Are you presently employed? Yes If yes, whom do you suggest we contact?			
•	•	Yes N	о 🗌
Give three references (not rela	itives or former employers).		
Name Address Phone			
consideration for employment and m I authorize the investigation of any or organizations to provide relevant informaking such statements. I understand I may be required to employment, if required. I understand that if I am extended ar I consent to the release of any or all UNDERSTAND THAT THIS APPLICATI CONTRACT OF EMPLOYMENT NOR GU CEO OF SYNC TECHNOLOGY INTEGRA AGREEMENT MUST BE IN WRITING, S EMPLOYER AND MY EMPLOYMENT MAN I have read, understand, and by my signal	in this employment application is true a ay result in my dismissal if discovered a r all statements contained in this application and opinions that may be useful successfully pass a drug screening of offer of employment it may be conditionated information as may be deemed on, verbal statements by MANARANTEE EMPLOYMENT FOR ANY LATION HAS THE AUTHORITY TO ESIGNED BY THE CEO. AND AS THE VERTICAL STATEMENTS BY THE CEO. AND THE VERTICAL STATEMENTS BY THE CEO. AND AS THE VERTICAL STATEMENTS BY THE VERTICAL STA	ation. I also authorize, whether listed or not, any person, school, current employer, past eul in making a hiring decision. I release such persons and organizations from any legal lia examination. I hereby consent to a pre- and/or post-employment drug screen as a coned upon my successfully passing a complete pre-employment physical examination. I necessary to judge my capability to do the work for which I am applying. NAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS DEFINITE PERIOD OF TIME. SINCE INDIANA IS AN AT-WILL EMPLOYMENT STATENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD EMPLOYEE, IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE TH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.	employers and bility in condition of OR IMPLIED E, ONLY THE D AND SUCH
Signature:		Date:	