



## EMPLOYMENT APPLICATION

Vantage Point Solutions (the "Company") is an equal opportunity/affirmative action employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, nation origin, marital status, ancestry, citizenship, veteran status, sexual orientation or preference, or physical or mental disability.



**VANTAGEPNT.com** 605-995-1777  
2211 N Minnesota Street Mitchell SD 57301

## Personal

Last name	First name	Initial
Home address	City, State, ZIP	
Home telephone #	Mobile Telephone #	
Email address	Are you at least 18 years old?	
Position applying for		
Referred by	Current salary	
Do you have any relatives employed by the Company?	If yes, who?	

## Education

School	City, State	Major Studies	Degree, Diploma, License, or Certificate
High School			
Technical, Business, or Other			
College/University			
List any professional designations	Percentage of time willing to travel		
Computer skills (hardware/software)			
Other special knowledge, skills, or qualifications			

## Employment History

List all employments for the past 10 years, starting with the most recent position. All information **must** be completed. You may attach a resume, but not in place of completing the required information.

Employed from / /	Employer name	
Employed until / /	Employer address	
Starting salary		Ending salary
Supervisor name		Supervisor phone number
Job title		Reason for leaving
Duties & Responsibilities		

Employed from / /	Employer name	
Employed until / /	Employer address	
Starting salary		Ending salary
Supervisor name		Supervisor phone number
Job title		Reason for leaving
Duties & Responsibilities		

## Employment History continued

List all employments for the past 10 years, starting with the most recent position. All information **must** be completed. You may attach a resume, but not in place of completing the required information.

Employed from / /	Employer name	
Employed until / /	Employer address	
Starting salary		Ending salary
Supervisor name		Supervisor phone number
Job title		Reason for leaving
Duties & Responsibilities		

Employed from / /	Employer name	
Employed until / /	Employer address	
Starting salary		Ending salary
Supervisor name		Supervisor phone number
Job title		Reason for leaving
Duties & Responsibilities		

## General

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	May we contact your current employer for references?
<input type="checkbox"/>	<input type="checkbox"/>	If hired, will you be able to work overtime?
<input type="checkbox"/>	<input type="checkbox"/>	Will you be able to perform the essential job functions for the position you are applying for with or without reasonable accommodation?
<input type="checkbox"/>	<input type="checkbox"/>	Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, which has not been annulled, expunged, or sealed by court? (A “yes” response does not automatically disqualify your application.)

## Certification & Authorization

The above information is true and correct. I understand that, in the event of my employment by the Company, I shall be subject to dismissal if any information that I have given in this application is false or misleading or if I have failed to give any information herein requested, regardless of the time elapsed after discovery.

I authorize the Company to inquire into my educational, professional and past employment history references as needed to research my qualifications for this position. I hereby give my consent to any former employer to provide employment-related information about me to the Company and will hold the Company and my former employer harmless from any claim made on the basis that such information about me was provided or that any employment decision was made on the basis of such information. I further authorize the Company to obtain any credit and consumer check.

I understand that nothing in this employment application, the granting of an interview or my subsequent employment with the Company is intended to create an employment contract between myself and the Company under which my employment could be terminated only for cause. On the contrary I understand and agree that, if hired, my employment will be terminable at will and may be terminated by me or the Company at any time and for any reason. I understand that no person has any authority to enter into any agreement contrary to the foregoing.

If employed, I will be required to provide original documents which verify my identity and right to work in the United States under the Immigration Reform and Control Act (IRCA) of 1986. The document(s) provided will be used for completion of Form I-9.

I hereby acknowledge that I have read and agree to the above statements.

Signature	Date