#### **Brass Eye Center**

713 Troy Schenectady Road, Suite 135, Latham, NY 12110

# **EMPLOYMENT APPLICATION**

| PLEASE PRINT OR TYPE  | Today's Date:  |  |  |   |
|---|--|--|--|---|
| First Name  | MI   | Last Name                                  | Preferre                                 | ed Name/Nickname                        |
| Street Address  | City   | у  | State                                    | Zip Code                                |
| Phone   | Alternate/ Phone   |  | Email Addre                              | ess                                     |
| PLEASE PLACE A CHECK BY YOUR RE   | SPONSE OR PROVII   | DE THE APPROPE                             | Part Time                                | Temporary                               |
| low did you hear about us?  | Walk In  | Referral                                   | Advertise<br>ment                        | Other:                                  |
| Have you worked for this company pefore?  | No   | Name:<br>Yes                               | Where:                                   |   |
| Do you know anyone who works nere?  | No   | Yes  | Name:                                    |   |
| Desired Pay: Hourly Pay (Minimum, if applicable)  | \$   | Annual Pay                                 | \$<br>Minimum                            | \$<br>Desired                           |
| When are you able to start work?  | Date:  |  | <u> </u>                                 |   |
| n what local area do you prefer to work?  | ?  |  |  |   |
| Position desired:   |  |  |  |   |
|   |  |  |  |   |
| EASE CHECK YES OR NO TO THE FOLL  | OWING:   |  |  |   |
| you authorized to work in the United Sta  | ates?  | _  | Yes No                                   |   |
| leral law requires that employers hire only in<br>apliance with these laws, Brass Eye Center<br>connection, all offers of employment are sub<br>be necessary for you to submit such docun | will verify the status on which were will verify the status of the werification of the were will be will be set to the weight of the weight will be will be set to the weight of the wei | of every individual of the applicant's ide | offered employment wentity and employmer | vith the Company<br>nt authorization, a |

Brass Eye Center is an equal opportunity employer and does not discriminate against any applicant or employee because of race, color, religion, sex, national origin, disability, age, or military or veteran status in accordance with federal law. In addition, Brass Eye Center complies with applicable state and local laws governing non-discrimination in employment in every jurisdiction in which it maintains facilities. Brass Eye Center also provides reasonable accommodation to qualified individuals with disabilities in accordance with applicable laws.

authorization.

|   | nish a work perm                              |                         |                      | Yes                                       | No                 |
|---|---|-------------------------|----------------------|---|--------------------|
| Are you capable of performing the essential functions of the job for which you are applying with or without a reasonable accommodation? |   |                         | Yes No               |   |                    |
| E LIST YOU  | R WORK EXP                                    | ERIENCE BEL             | OW (MOST RECE        | ENT JOB FIRST)                            |                    |
| husetts applica   | ants may include                              | any verified work       | c performed on a vol | unteer basis.                             |                    |
|   | COMPANY NAI                                   | ME                      |                      | YOUR POSITION and TIT                     | LE                 |
| FROM  | NO. & STREET                                  | 7                       |                      | SUPERVISOR'S NAME,                        | TITLE and POSITION |
| /   |   |                         |                      | COT ENVICENCE TO LILLY,                   | THEE and I connect |
| nth Year  | CITY  | STATE                   | ZIP CODE             | SUPERVISOR'S TELEPH                       | ONE NUMBER         |
|   |   |                         |                      |   |                    |
|   | TYPE OF BUSI                                  | NESS                    |                      |   |                    |
| TO  | TELEPHONE N                                   | NUMBER                  | TERMINATION          | REASON                                    |                    |
|   |   | ( ) VOLUNT              |                      |   |                    |
| /   | _ ( )   |                         | VOLUNTA              |   |                    |
| /   | _   ` ,                                       | CRIBE YOUR <u>MAJOR</u> | INVOLUNT             |   |                    |
| /   | _   ` ,                                       | CRIBE YOUR <u>MAJOR</u> | INVOLUNT             |   |                    |
| /   | _   ` ,                                       | CRIBE YOUR <u>MAJOR</u> | INVOLUNT             |   |                    |
| /   | _   ` ,                                       | CRIBE YOUR <u>MAJOR</u> | INVOLUNT             |   |                    |
| /   | _   ` ,                                       |                         | INVOLUNT             |   | 'LE                |
| /   | BRIEFLY DESC                                  | ME                      | INVOLUNT             | TARY                                      |                    |
| nth / Year  FROM  | BRIEFLY DESC                                  | ME                      | INVOLUNT             | YOUR POSITION and TIT                     |                    |
| nth / Year  | BRIEFLY DESC                                  | ME                      | INVOLUNT             | YOUR POSITION and TIT                     | TITLE and POSITION |
| nth / Year  FROM  | BRIEFLY DESC  COMPANY NAI  NO. & STREET  CITY | ME<br>STATE             | DUTIES               | YOUR POSITION and TITE SUPERVISOR'S NAME, | TITLE and POSITION |
| nth / Year  FROM  | COMPANY NAI                                   | ME<br>STATE             | DUTIES               | YOUR POSITION and TITE SUPERVISOR'S NAME, | TITLE and POSITION |
| nth / Year  FROM  | BRIEFLY DESC  COMPANY NAI  NO. & STREET  CITY | ME STATE                | DUTIES               | YOUR POSITION and TITE SUPERVISOR'S NAME, | TITLE and POSITION |

|              | COMPANY NAME    |                  |             | YOUR P    | OSITION and TITLE               |
|--------------|-----------------|------------------|-------------|-----------|---------------------------------|
|              | COMI ANT NAME   |                  |             | TOOKT     | OSITION and TITLE               |
|              |                 |                  |             |           |                                 |
| FROM         | NO. & STREET    |                  |             | SUPERV    | ISOR'S NAME, TITLE and POSITION |
| Month Year   |                 |                  |             |           |                                 |
|              | CITY            | STATE            | ZIP CODE    | SUPERV    | ISOR'S TELEPHONE NUMBER         |
|              |                 |                  |             |           |                                 |
|              | TYPE OF BUSINES | SS               |             |           |                                 |
|              |                 |                  |             |           |                                 |
| ТО           | TELEPHONE NUM   | RER              | TERMINATION |           | REASON                          |
| ,            |                 |                  | VOLUNTARY   | ,         | INE IGEN                        |
| Month Year   | ( )             |                  | INVOLUNTAL  |           |                                 |
|              | BRIEFLY DESCRIE | BE YOUR MAJOR DU | TIES        |           | 1                               |
|              |                 |                  |             |           |                                 |
|              |                 |                  |             |           |                                 |
|              |                 |                  |             |           |                                 |
|              | COMPANY NAME    |                  |             | T VOLID D | OSITION and TITLE               |
|              | COMI ANT NAME   |                  |             | TOOKT     | OSITION and TITLE               |
|              |                 |                  |             |           |                                 |
| FROM         | NO. & STREET    |                  |             | SUPERV    | ISOR'S NAME, TITLE and POSITION |
| Month / Year |                 |                  |             |           |                                 |
|              | CITY            | STATE            | ZIP CODE    | SUPERV    | ISOR'S TELEPHONE NUMBER         |
|              |                 |                  |             |           |                                 |
|              | TYPE OF BUSINES | SS S             |             |           |                                 |
|              |                 |                  |             |           |                                 |
| ТО           | TELEPHONE NUM   | RER              | TERMINATION |           | REASON                          |
| /            |                 | BER              | VOLUNTARY   | ,         | NEAGON                          |
| Month Year   | ( )             |                  | INVOLUNTAL  |           |                                 |
|              | BRIEFLY DESCRIE | BE YOUR MAJOR DU | TIES        |           |                                 |
|              |                 |                  |             |           |                                 |
|              |                 |                  |             |           |                                 |
|              |                 |                  |             |           |                                 |

#### **EDUCATION:**

| NAME AND ADDRESS OF SCHOOL | MAJOR<br>SUBJECT | DID YOU<br>GRADUATE? | TYPE OF<br>DEGREE OR DIPLOMA |
|----------------------------|------------------|----------------------|------------------------------|
| HIGH SCHOOL OR PREP        |                  |                      |                              |
| COLLEGE                    |                  |                      |                              |
| COLLEGE OR GRADUATE        |                  |                      |                              |
| OTHER                      |                  |                      |                              |

### **PROFESSIONAL DESIGNATIONS:**

| DESIGNATION | ORGANIZATION GRANTING DESIGNATION | DATE COMPLETED |
|-------------|-----------------------------------|----------------|
| DESIGNATION | ORGANIZATION GRANTING DESIGNATION | DATE COMPLETED |
|             |                                   |                |

### PROFESSIONAL CERTIFICATION:

| TYPE OF LICENSE | STATE GRANTING LICENSE | LICENSE NUMBER |
|-----------------|------------------------|----------------|
| TYPE OF LICENSE | STATE GRANTING LICENSE | LICENSE NUMBER |

## **REFERENCES**: Please list three professional references

| NAME | RELATIONSHIP | COMPANY | PHONE/ALTERNATE PHONE |
|------|--------------|---------|-----------------------|
|      |              |         |                       |
|      |              |         |                       |
|      |              |         |                       |

#### PLEASE READ CAREFULLY BEFORE SIGNING APPLICATION

I have submitted the attached form to the company for the purpose of obtaining employment. I acknowledge that the use of this form, and my filling it out, does not indicate that any positions are open, nor does it obligate the company to further process my application.

My signature below attests to the fact that the information that I have provided on my application, resume, given verbally, or provided in any other materials, is true and complete to the best of my knowledge and also constitutes authority to verify any and all information submitted on this application. I understand that any misrepresentation or omission of any fact in my application, resume or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, termination from the Company's employ.

I also affirm that I have not signed any kind of restrictive document creating any obligation to any former employer that would restrict my acceptance of employment with the Company in the position I am seeking.

I understand that this application is not an employment contract for any specific length of time between the Company and me, and that in the event I am hired, my employment will be "at will" and either the Company or I can terminate my employment with or without cause and with or without notice at any time. Nothing contained in any handbook, manual, policy and the like, distributed by the Company to its employees is intended to or can create an employment contract, an offer of employment or any obligation on the Company's part. The Company may, at its sole discretion, hold in abeyance or revoke, amend or modify, abridge or change any benefit, policy practice, condition or process affecting its employees.

<u>References</u>: I hereby authorize the company and its agents to make such investigations and inquiries into my employment and educational history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, and other persons from all liability in responding to inquires connected with my application and I specifically authorize the release of information by any schools, businesses, individuals, services or other entities listed by me in this form. Furthermore, I authorize the company and its agents to release any reference information to clients who request such information for purposes of evaluating my credentials and qualifications.

<u>Temporary/Contract Employment</u>: If employed as a temporary or contract employee, I understand that I may be an employee of the company and not of any client. If employed, I further understand that my employment is not guaranteed for any specific time and may be terminated at any time for any reason. I further understand that a contract will exist between the company and each client to whom I may be assigned which will require the client to pay a fee to the company in the event that I accept direct employment with the client, I agree to notify the company immediately should I be offered direct employment by a client (or by referral of the client to any subsidiary or affiliated company), either for a permanent, temporary (including assignments through another agency), or consulting positions during my assignment or after my assignment has ended.

| ,       | • | , ,   |  |
|---------|---|-------|--|
| SIGNED: |   | DATE: |  |