

COMPUTER PROJECTION RENTALS, INC.
d.b.a. CPR MultiMedia Solutions™

An Equal Opportunity Employer

Computer Projection Rentals, Inc. does not discriminate against any employee or applicant for employment on the basis of race, color, national origin, religion, sex, age, disability or other protected characteristic in accordance with applicable law.

APPLICATION FOR EMPLOYMENT

Date: _____

PERSONAL INFORMATION:

Name: _____

Last

First

Middle

Address: _____

Street

City

State

Zip

Telephone Number(s): _____

Social Security Number: _____

Position (s) Applying For: 1. _____

2. _____

3. _____

Full Time ____ Part Time ____ Temporary ____

Are You At Least 18 Years of Age? Yes ____ No ____

(If you are under 18, you may need to supply the company with a work permit or limit your hours to those permitted by law.)

Are you available for (please check all applicable responses):

Full Time ____ Part Time ____ Temporary/Freelance ____

Specify Days and Hours For Which You Are Available: _____

Date You Can Start: _____

• Are You Authorized to Work in the United States? Yes ____ No ____

If you are offered and accept a position, you will be required, in accordance with United States law, to provide proof of authority to work in the United States and to complete Immigration and Naturalization Service Form I-9.

Employment will be contingent on providing such proof.

Name: _____

• Have you ever been convicted of or plead guilty to a criminal offense that has not been expunged from your record? Yes ___ No ___

If yes, please list the nature of the offense, the date (s) of the offense and the date (s) of final disposition and the sentence imposed (A conviction does not necessarily mean you will not be considered or cannot be employed):

• Are you Currently Employed? _____

If So, May We Contact Your Present Employer? Yes ___ No ___

EMPLOYMENT HISTORY:

(You may attach current resume in lieu of completing this section.)

Start With Your Current or Most Recent Employment.

1. Employer: _____

Address: _____

Telephone #: _____

Job Title: _____ Supervisor: _____

Salary: _____ Dates Employed: _____

Responsibilities: _____

Reason for Leaving: _____

2. Employer: _____

Address: _____

Telephone #: _____

Job Title: _____ Supervisor: _____

Salary: _____ Dates Employed: _____

Responsibilities: _____

Reason for Leaving: _____

3. Employer: _____

Address: _____

Telephone #: _____

Job Title: _____ Supervisor: _____

Salary: _____ Dates Employed: _____

Responsibilities: _____

Reason for Leaving: _____

Name: _____

4. Employer: _____
 Address: _____
 Telephone #: _____
 Job Title: _____ Supervisor: _____
 Salary: _____ Dates Employed: _____
 Responsibilities: _____
 Reason for Leaving: _____

5. Employer: _____
 Address: _____
 Telephone #: _____
 Job Title: _____ Supervisor: _____
 Salary: _____ Dates Employed: _____
 Responsibilities: _____
 Reason for Leaving: _____

(If you need additional space, please continue on a separate sheet of paper.)

• Have you worked under a different name for any of these employers?
 Yes ____ No ____

If yes, please identify the employer and state the name worked under:

EDUCATION:

1. Post-Graduate:

School: _____
 Address: _____
 Graduated? Yes ____ No ____ Degree: _____
 Course of Study: _____
 Name: _____

2. College:

School: _____
 Address: _____
 Graduated? Yes ____ No ____ Degree: _____
 Course of Study: _____

Name: _____

3. High School:

School: _____

Address: _____

Graduated? Yes _____ No _____ Degree: _____

Course of Study: _____

• Relevant Experience, Education and Skills. Please list or describe any experience, education and/or skills that you believe are relevant to the position (s) applied for and would like to have considered:

If you need additional space, please continue on a separate sheet of paper)

REFERENCES:

Give The Names of Three Persons Not Related To You Whom You Have Known At Least One Year. (Employment-related contacts are preferred.)

1. Name: _____

Address: _____

Telephone Number(s): _____

Years Known: _____

How Known: _____

2. Name: _____

Address: _____

Telephone Number(s): _____

Years Known: _____

How Known: _____

3. Name: _____

Address: _____

Telephone Number(s): _____

Years Known: _____

How Known: _____

Name: _____

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING THIS APPLICATION

NOTIFICATION TO JOB APPLICANTS OF DRUG AND ALCOHOL TESTING

It is the policy of Computer Projection Rentals, Inc. (the "Company") to maintain a safe, healthy and productive work environment for all its employees, to provide outstanding service to its customers, and to maintain the integrity and security of its facilities and property.

To help achieve these goals, the Company requires that every employee be free of alcohol and drug abuse. An offer of employment may be conditioned on the applicant taking and passing a test for the presence of controlled or illegal substances and/or alcohol.

AUTHORIZATION TO INVESTIGATE STATEMENTS; FALSE STATEMENTS

I authorize the Company to investigate all statements in this Application for Employment and to secure any necessary information from all employers, references, and academic institutions. I HEREBY RELEASE ALL OF THOSE EMPLOYERS, REFERENCES, ACADEMIC INSTITUTIONS, AND THE COMPANY FROM ANY AND ALL LIABILITY ARISING FROM THEIR GIVING OR RECEIVING INFORMATION ABOUT MY EMPLOYMENT, ACADEMIC CREDENTIALS, QUALIFICATIONS AND/OR SUITABILITY FOR EMPLOYMENT WITH THE COMPANY. I understand that any offer of employment is contingent upon a satisfactory evaluation of my employment history and references.

I hereby certify that all information provided in this Application for Employment is true and correct. I understand that any false or misleading statements contained in this Application for Employment or otherwise made by me to the Company will be sufficient cause for rejection of my application if the Company has not employed me or for immediate dismissal if the Company has employed me.

COMPANY POLICIES; NO CONTRACT; AT-WILL EMPLOYMENT

In the event of my employment by the company, I will comply with all rules, regulations and policies of the company.

I understand that nothing in this Application for Employment, in the Company's policy statements or personnel guidelines (whether in a policy manual or elsewhere and whether written or oral), or in my communications with any Company employee is intended to, and does not, create a contract (employment or otherwise) between the Company and me. I further understand that the Company has and reserves the right to modify its policies at any time with or without giving any notice or such changes. No promises regarding employment have been made to me, and I understand that if any such promise is or has been made it is not binding upon the Company unless it is made in writing and signed by an officer of the Company.

I UNDERSTAND THAT IF AN EMPLOYMENT RELATIONSHIP IS ESTABLISHED, IT IS AN "AT-WILL" RELATIONSHIP, MEANING THAT I HAVE THE RIGHT TO TERMINATE MY EMPLOYMENT AT ANY TIME FOR ANY OR NO REASON, AND THE COMPANY ALSO HAS THE RIGHT TO TERMINATE MY EMPLOYMENT AT ANY TIME FOR ANY OR NO REASON.

Name: _____

CONSIDERATION OF APPLICATION

I understand that this Application for employment will be considered only for thirty days from the date of my signing, at the conclusion of which time, if I have not been employed by the Company and still wish to be considered for employment, it will be necessary for me to complete and submit a new application.

I hereby acknowledge that I have read and fully understand each of the above sections (Notification to Job Applicants of Drug and Alcohol Testing; Authorization to Investigate Statements; False Statements; Company policies; No Contract; At-Will Employment; and Consideration of Application).

LIE DETECTOR NOTICE

UNDER MARYLAND LAW AN EMPLOYER MAY NOT REQUIRE OR DEMAND AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. ANY EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100.

I hereby acknowledge that I have read and understand the above notice concerning lie detector tests.

Signature: _____ **Date:** _____

FOR OFFICE USE ONLY: Date Received: _____

PRE-EMPLOYMENT INQUIRY RELEASE

In connection with my application for employment (including contract for services) with you, I understand that investigative background inquiries are to be made on myself including consumer credit, criminal convictions, motor vehicle and other reports. These reports will include information as to my character, work habits, performance and experience along with reasons for termination of past employment from previous employers. Further, I understand that you will be requesting information from various Federal, State, and other agencies relating to my driving, credit, criminal, civil and other experiences.

I authorize without reservation, any party or agency contacted by **Computer Projection Rentals, Inc. d.b.a. CPR MultiMedia Solutions™** to furnish the above-mentioned information.

I hereby consent to your obtaining the above information from CIC and/or any of their licensed agents. I understand to aid in the proper identification of my file or records the following information, as well as other information, is necessary.

Print Name: _____

Social Security #: _____ - _____ - _____

Date of Birth: _____ Sex: _____ Race: _____

Current Address: _____

Former Addresses in past 5 years:

1. Dates: _____

Address: _____

2. Dates: _____

Address: _____

3. Dates: _____

Address: _____

4. Dates: _____

Address: _____

Drivers' License #: _____ State of Issue: _____

Applicant's Signature _____ Date: _____