

For Internal Use Only			
S =	AT =	AP =	D =
			TF Update: _____
Interviewer: _____		Campaign: _____	
Date of Training: _____		Training Pay Rate: \$ _____	
Spanish: Yes <input type="checkbox"/> No <input type="checkbox"/>		Pay Rate Assigned after Training: \$ _____	
Accepted <input type="checkbox"/> Hold <input type="checkbox"/> Not Accepted <input type="checkbox"/>		Note: _____	
Full time <input type="checkbox"/> Part Time <input type="checkbox"/>		Production Date: _____	



**APPLICATION**

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

**Please Print**

Position(s) applied for \_\_\_\_\_ Date of Application \_\_\_\_\_

Referral Source:  Newspaper Ad  Employee  Relative  Government Employment Agency  
 Walk-in  Private Employment Agency  Other \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Last First Middle  
Street City State Zip Code

Home #: ( ) - Other #: ( ) - SSN#: \_\_\_\_\_

Email: \_\_\_\_\_ Divers Lic# \_\_\_\_\_

If you are under 18, can you furnish a work permit?.....  Yes  No

Have you ever filed an application with Phone Ware Inc. before? .....  Yes  No

If yes, give date..... / /

Have you ever been employed by Phone Ware Inc. before?.....  Yes  No

If yes, give dates.....From / / To / /

Are you legally entitled to work in the United States?.....  Yes  No

Date available to work..... / /

Type of employment desired:  Full Time  Part Time  Temporary  Seasonal  Educational CO-OP

Will you travel if job requires it?.....  Yes  No

Are you able to meet the attendance requirements of the position?.....  Yes  No

Do you know any reason why you cannot perform the essential functions of the job for which you are applying with or without reasonable accommodations?.....  Yes  No

Explain: \_\_\_\_\_

Will you work overtime if required?.....  Yes  No

If no, please explain: \_\_\_\_\_

Have you ever been bonded?.....  Yes  No

AN EQUAL OPPORTUNITY EMPLOYER

# EMPLOYMENT HISTORY

List your past employers, assignments or volunteer activities, starting with the most recent, including military experience. Explain any gaps in employment in comments section below. Attach separate sheet if necessary.

EMPLOYER	TELEPHONE ( ) -	DATES EMPLOYED FROM / TO	SUMMARIZE THE NATURE OF THE WORK PERFORMED AND JOB RESPONSIBILITIES
ADDRESS		/	
JOB TITLE			
IMMEDIATE SUPERVISOR AND TITLE			
REASON FOR LEAVING			
MAY WE CONTACT FOR REFERENCE		YES NO LATER	
EMPLOYER	TELEPHONE ( ) -	DATES EMPLOYED FROM / TO	SUMMARIZE THE NATURE OF THE WORK PERFORMED AND JOB RESPONSIBILITIES
ADDRESS		/	
JOB TITLE			
IMMEDIATE SUPERVISOR AND TITLE			
REASON FOR LEAVING			
MAY WE CONTACT FOR REFERENCE		YES NO LATER	
EMPLOYER	TELEPHONE ( ) -	DATES EMPLOYED FROM / TO	SUMMARIZE THE NATURE OF THE WORK PERFORMED AND JOB RESPONSIBILITIES
ADDRESS		/	
JOB TITLE			
IMMEDIATE SUPERVISOR AND TITLE			
REASON FOR LEAVING			
MAY WE CONTACT FOR REFERENCE		YES NO LATER	
EMPLOYER	TELEPHONE ( ) -	DATES EMPLOYED FROM / TO	SUMMARIZE THE NATURE OF THE WORK PERFORMED AND JOB RESPONSIBILITIES
ADDRESS		/	
JOB TITLE			
IMMEDIATE SUPERVISOR AND TITLE			
REASON FOR LEAVING			
MAY WE CONTACT FOR REFERENCE		YES NO LATER	

COMMENTS (INCLUDING EXPLANATION OF ANY GAPS IN EMPLOYMENT) \_\_\_\_\_

# EDUCATIONAL BACKGROUND

List last two (2) schools attended, starting with most recent.

School, City & State	No. of Years Completed	Degree / Diploma	GPA / Class Rank	Major/Minor	Graduation Mth & Yr

List any foreign language(s) and check the box that best describes your skill level.

Language	Read & Write	Read & Speak	Read Only	Speak Only

Please check the box that best describes your level of experience:

Other Skills	None	Beginner	Intermediate	Advanced
Word				
Excel				
Power Point				
Typing				
10 Key				

## REFERENCES

List names and phone number of two business/work references and one personal reference. All references should not be related to you and not be previous supervisors.

NAME	PHONE NUMBER	YEARS KNOWN
	( ) -	
	( ) -	
	( ) -	

List professional, trade, business or civic associations and any offices held. (You may exclude information which would reveal sex, race, religion, national origin, age, ancestry, handicap or other protected status.)

ORGANIZATION	OFFICES HELD

List special accomplishments or awards and any skills or qualifications that may qualify you for employment with Phone Ware, Inc. (You may exclude information which would reveal sex, race, religion, national origin, age, ancestry, handicap or other protected status.)

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1) What motivates you to come to work On Time every day? \_\_\_\_\_

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2) What is your definition of good customer service? \_\_\_\_\_

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3) What is your definition of poor customer service? \_\_\_\_\_

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Please Read Carefully, Initial Each Paragraph and Sign Below; Company refers to Phone Ware, Inc., Phone Net, Inc. and SunNet, LLC.

\_\_\_\_\_ If Hired, in consideration of my employment, I agree that my employment is "at will," which means that my employment may be terminated with or without cause, and with or without notice, at any time, at the option of either the Company or myself. If hired, I will receive a copy of the Employee Handbook and agree to read it fully. I understand that, if I am hired, the "at will" nature of my employment may only be changed by a written agreement signed by me and the President of the Company.

\_\_\_\_\_ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

\_\_\_\_\_ I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the company's designated representative.

\_\_\_\_\_ I understand that I will be required to produce a urine sample, for the purpose of laboratory analysis for the presence of drugs, at the time of the pre-employment physical or at some other time as designated by the Company, in accordance with the law.

\_\_\_\_\_ I further understand that if I refuse to produce a sample of urine for drug screening purposes or if I produce a urine sample which tests positive for the presence of drugs in confirmation laboratory tests, that I will not be hired.

\_\_\_\_\_ I understand that I will have the opportunity to disclose that I have taken certain prescription drugs or over-the-counter medications which may be revealed in drug screening through urinalysis and that such information may be taken into consideration in the test taking process.

\_\_\_\_\_ I acknowledge that I have read and understand the above paragraphs relating to drug screening through urine analysis. As indicated by signature below, I hereby voluntarily consent to produce a sample of urine for the purpose of drug screening when requested to do so.

\_\_\_\_\_ I authorize the Company to use photos, and/or other likenesses of myself for any promotional materials via print or electronic media including social media. The Company reserves the right to use any photo or likeness for a time period beginning when this form is signed and ending upon written request of the employee.

\_\_\_\_\_ Non-Solicitation of Employees. During my time with the company and for a period of two years following the end, for whatever reason, of my employment with the Company, I agree that I shall not, directly or indirectly, induce or attempt to induce, an employee of the Company to end or diminish his/hers relationship with the Company, or solicit or attempt to solicit any Company employee for outside employment.

\_\_\_\_\_ As a condition of continued employment with Phone Ware Inc (PWI) and Phone Net Inc (PNI), I understand that I am strictly prohibited from contacting customers via any method other than the PWI/PNI dialer system. Removing a customer's information, in any form, from the PWI/PNI premises for any reason is considered theft and is cause for immediate termination, as well as possible criminal prosecution. The prohibition against removing customer information is broad and includes, but is not limited to, copying information on paper or electronic notes, or storing it on any electronic device or medium, such as cell phones, emails, text messages or flash drives.

\_\_\_\_\_ To meet the confidentiality needs of our clients and to comply with industry standards and best practices, cell phones are not allowed in your cubicles. In case of an emergency, you may receive calls on PWI's main phone number at (858) 459-3000. Please notify those who may need to reach you in an emergency such as a call from your children's school.

\_\_\_\_\_ The only authorized form of communication with customers (or potential customers) of our clients is through the PWI/PNI dialer system. PWI/PNI has zero tolerance for any employee who contacts a customer via cell phone, text message or other non-authorized form of communication.

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_