



Employment Application

E-Verify Participation Notice

This employer participates in E-Verify and will provide the federal government with your Form I-9 information to confirm that you are authorized to work in the U.S. If E-Verify cannot confirm that you are authorized to work, this employer is required to give you written instructions and an opportunity to contact the Department of Homeland Security (DHS) or the Social Security Administration (SSA) so you can begin to resolve the issue.

Personal Information

Name:	Date:
Email Address:	Address:
City, State, Zip Code:	Phone Number:

List all states of residency outside of Texas in the past 7 years:

Are you able to perform the essential functions of the job for which you are applying, with or without reasonable accommodation?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, please explain. (If you have any questions as to what functions are applicable to the position for which you are applying, please ask the interviewer before you answer this question)	Explain:
When are you available to begin work?	
Are you legally eligible to be employed in the United States?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you over the age of 18 years?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Desired Salary/Rate:	

Education

	Name and Location of School	Number of Years Attended/Degree Received	Subjects Studied/Major
High School			
College or University			

Trade, Business, or Correspondence School			
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<p align="center">Employment History</p> <p align="center">Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time.</p>

Name of Employer:	Phone Number:
Full Address (Including Street, City, State, & Zip):	Supervisor's Name and Title:
Job Title:	Reason for Leaving:
Dates Employed:	Describe the Work Performed:

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Job Title:	Reason for Leaving:
Dates Employed:	Describe the Work Performed:

Name of Employer:	Phone Number:
Full Address (Including Street, City, State, & Zip):	Supervisor's Name and Title:
Job Title:	Reason for Leaving:
Dates Employed:	Describe the Work Performed:

Criminal History Disclosure

Have you ever been convicted of a felony or misdemeanor that has not been expunged, sealed, or otherwise legally pardoned? ☐ Yes ☐ No

If yes, please describe the nature of the offense, the date of the conviction, and the outcome. (A conviction does not automatically disqualify you from employment. All circumstances will be considered, including the nature of the offense and its relevance to the position.)

IMPORTANT, PLEASE READ AND SIGN

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for AHI Supply to hire me. If I am hired, I understand that either AHI Supply or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of AHI Supply has the authority to make any assurance to the contrary.

I attest with my signature below that I have given AHI Supply true and complete information on this application. No requested information has been concealed. I authorize AHI Supply to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

AHI Supply is an equal opportunity employer. AHI Supply does not discriminate in employment regarding race, color, religion, national origin, citizenship status, ancestry, age, sex (including sexual harassment), sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service or any other characteristic protected by law.

Signature:

Date: