

# ADVANTAGE PAWN, INC.

## - EMPLOYMENT APPLICATION -

This company is an equal opportunity employer. In all our employment practices, including hiring, we are firmly committed to equal opportunity without regard to race, religion, color, sex age, national origin, citizenship, disability or any other basis of discrimination prohibited by applicable local, state or federal law. No question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on such grounds.

### ANSWER ALL QUESTIONS COMPLETELY AND THOROUGHLY - INCOMPLETE APPLICATIONS WILL BE REJECTED

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

Street Address: \_\_\_\_\_

\_\_\_\_\_

SSN: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

18 years or older? [ ] Yes [ ] No, If No, Birth date: \_\_\_\_\_

Were you known to any employer, school or reference by another name(s)? [ ] Yes [ ] No  
If Yes, indicate other name(s): \_\_\_\_\_

POSITION FOR WHICH YOU ARE APPLYING: \_\_\_\_\_

- Wage / salary you are expecting: \$ \_\_\_\_\_ per \_\_\_\_\_
- **If hired, date you can start work:** \_\_\_\_\_
- Are you willing to travel?: [ ] Yes [ ] No. If Yes, what percentage? \_\_\_\_\_
- Would you be willing to relocate? [ ] Yes [ ] No
- **Have you ever been employed by this company before?** [ ] Yes [ ] No  
If Yes, where and when? \_\_\_\_\_
- Who referred you to this company for employment?: \_\_\_\_\_
- Names of friends or relatives working for the Company (list name(s) and relationship):  
\_\_\_\_\_

### AVAILABILITY:

How many hours per week are you available for work? \_\_\_\_\_ (List times below)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
FROM						
TO						

- **Are there any hours, shifts or days you cannot or will not work?** [ ] Yes [ ] No  
If Yes, when: \_\_\_\_\_
- How far do you live from this location? \_\_\_\_\_
- **Do you have transportation to work?** [ ] Yes [ ] No
- Are you currently on Layoff Status, Leave of Absence or other Suspension of Employment and subject to a recall with another employer? [ ] Yes [ ] No  
If Yes, provide details: \_\_\_\_\_

- **Have you ever been discharged (or terminated) by a former employer?**      Yes  No  
If Yes, explain: \_\_\_\_\_

CERTAIN POSITIONS WITHIN THE COMPANY REQUIRE USE OF A CAR OR OTHER MOTORIZED VEHICLE. IF USE OF SUCH A VEHICLE WERE REQUIRED IN THE JOB FOR WHICH YOU ARE APPLYING...

- Do you have a valid Driver's License?      Yes  No
- Do you have access to a car or other motorized vehicle?                              Yes  No
- Do you or can you get liability insurance on such a vehicle?                          Yes  No

**YOUR DRIVING RECORD WILL BE CHECKED IF YOU DRIVE A COMPANY VEHICLE**

**EDUCATION:**

High School: \_\_\_\_\_ Address: \_\_\_\_\_  
Last grade completed: \_\_\_\_\_ Grade Point Avg.: \_\_\_\_\_ Graduated?  Yes  No

Trade or College: \_\_\_\_\_ Address: \_\_\_\_\_  
Last grade completed: \_\_\_\_\_ Grade Point Avg.: \_\_\_\_\_ Graduated?  Yes  No  
Courses / Major: \_\_\_\_\_ **Still Enrolled?**  Yes  No

**EMPLOYMENT HISTORY:** (Start with most recent employer)

Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Salary/Wage: \_\_\_\_\_ Dates worked: From \_\_\_\_\_ to \_\_\_\_\_  
Still employed:  Yes  No May we contact this employer?  Yes  No  
Supervisor: \_\_\_\_\_ Reason for Leaving? \_\_\_\_\_  
**Reference Check Performed By:** \_\_\_\_\_

Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Salary/Wage: \_\_\_\_\_ Dates worked: From \_\_\_\_\_ to \_\_\_\_\_  
Still employed:  Yes  No May we contact this employer?  Yes  No  
Supervisor: \_\_\_\_\_ Reason for Leaving? \_\_\_\_\_  
**Reference Check Performed By:** \_\_\_\_\_

Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Salary/Wage: \_\_\_\_\_ Dates worked: From \_\_\_\_\_ to \_\_\_\_\_  
Still employed:  Yes  No May we contact this employer?  Yes  No  
Supervisor: \_\_\_\_\_ Reason for Leaving? \_\_\_\_\_  
**Reference Check Performed By:** \_\_\_\_\_

**\* DURING THE LAST 7 YEARS, HAVE YOU EVER BEEN CONVICTED OF, PLED GUILTY TO OR PLED NO CONTEST TO A CRIME, EXCLUDING MISDEMEANORS AND TRAFFIC VIOLATIONS?**  Yes  No

If Yes, explain: \_\_\_\_\_

\* A conviction will not necessarily bar you from employment.

**MILITARY SERVICE**

Branch: \_\_\_\_\_ Date entered: \_\_\_\_\_ Discharged: \_\_\_\_\_

Rank: \_\_\_\_\_

Do you have any service-related skills applicable to civilian employment?: [ ] Yes [ ] No

If Yes, describe: \_\_\_\_\_

**ADDITIONAL INFORMATION: ( all applicants )**

List additional training or experience: \_\_\_\_\_

**AGREEMENT**

PLEASE READ THE FOLLOWING CAREFULLY AND SIGN IN THE SPACE PROVIDED

I hereby certify that I have read and fully completed this application and that the facts set forth in this employment application (and accompanying resume, if any) are true and correct to the best of my knowledge, and I agree and understand that any misrepresentation or falsification of information or omission of information during the employment application process may disqualify me from further consideration for employment and, if employed, will subject me to dismissal. I further certify that I am a true and bona fide job applicant, honestly interested in working in the position(s) for which I have applied, and am seeking employment with this company solely to provide me with the benefits of a job and for no other purpose.

I understand that in connection with my application for employment an inquiry into my background may include an investigative consumer report, which provides applicable information concerning character, general reputation, personal characteristics and standard of living. I understand that I have the right to make a written request within a reasonable period of time for information as to the nature and scope of any such report. If I am denied a job based either wholly or in part because of information contained in an investigative consumer report, I will be provided the name and address of the reporting agency that supplied the information.

I acknowledge that the Company reserves the right to modify or amend its policies at any time, without prior notice. These policies do not create any promises or contractual obligations between this Company and its employees. At this Company, my employment is at will. This means I am free to terminate my employment at any time, for any reason, with or without cause, and this Company retains the same rights. I further understand and agree that the Owner/President of this Company is the only person who may make an exception to this, including the at-will status of my employment, and it must be in writing and duly executed by the Owner/President of this Company.

If applicable to my employment, I have read and understood the notice regarding polygraph tests and my rights under this state's law.

**AUTHORIZATION TO RELEASE INFORMATION:** I authorize the references and/or employers listed on this application to give you any and all information concerning my previous employment and pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing such information to you. I agree and understand that the Company and its agents may investigate or seek information concerning my background and/or previous employment, whether of record or not. I further agree and understand that if employed, the Company may at any time seek any information from whatever source, which in its discretion, it deems relevant to my employment.

**NO DRUG USE POLICY:** Advantage Pawn does not hire persons who use illegal drugs. All persons seeking employment or employed with this Company may be required to take and pass a screening for illegal drugs, and may be subject to periodic tests for illegal drugs. I hereby voluntarily consent to provide a urine specimen (or blood specimen as required for alcohol testing only) at a collection facility designated by the Company, and further consent to have the specimen tested at a laboratory selected by the Company. I hereby certify that I (check one) [ ] Do or [ ] Do Not use illegal drugs.

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

**DISCLOSURE TO EMPLOYMENT APPLICANT  
REGARDING PROCUREMENT OF  
CONSUMER REPORT**

In connection with your application for employment and as part of the process of considering your candidacy as an employee, we may procure, or cause to be procured, a consumer report on you. In the event that information from the report is utilized in whole or in part in making an adverse decision with regard to your potential employment, before making the adverse decision we will provide you with a copy of the consumer report and a description in writing of your rights under the law.

By your signature below, you hereby authorize us to obtain a consumer report about you in order to consider you for employment.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Social Security Number

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date of Birth \*\*

\*\*Date of birth is required as an identifier to request criminal records only. This company does not discriminate based on age.



**SUBJECT RELEASE AND AUTHORIZATION**

NationCheck, LLC is hereby authorized to conduct a background investigation on me in the course of consideration for possible employment by **Advantage Pawn, Inc. dba. Cash In A Flash and Diamond Mine**. I voluntarily and knowingly authorize, without reservation, any duly authorized agent of NationCheck, LLC to obtain from any law enforcement agency, drug screening firm state, county or federal agency, present employer or supervisor, landlord, past employer or supervisor, finance bureau/office, credit bureau, collection agency, college, university or other institute of learning or certification, private business, military branch or the National Personnel Records Center, personal reference and/or other persons , and voluntarily and knowingly authorize the same to give, records or information that they may have concerning my criminal history, motor vehicle history, earnings history, credit history, character, employment records, record of attendance and earned degrees or certificates, or any other information requested, whether the said records are public or private, and including those which may be deemed to be privileged or confidential in nature and I voluntarily, knowingly and unconditionally release all such persons, including any named or unnamed informant, from any and all liability resulting from the furnishing of this information. A photographic, faxed or e-mailed copy of this authorization shall be as valid as the original.

**NationCheck, LLC is only an information provider and does not make hiring decisions**

**PROVIDE THE FOLLOWING INFORMATION / PLEASE WRITE LEGIBLY AND IN BLACK INK  
FULL NAME:**

**FORMER/MAIDEN/ALIAS/OTHER NAMES USED:**

**POSITION FOR WHICH YOU ARE APPLYING:**

**ADDRESS HISTORY FOR THE MOST RECENT 7 YEAR PERIOD (USE AN ADDITIONAL SHEET IF NEEDED):  
ADDRESS CITY/STATE/ZIP CODE COUNTY DATES OF RESIDENCE**

**DRIVER'S LICENSE NUMBER:** \_\_\_\_\_ **STATE:** \_\_\_\_\_

**NAME AS IT APPEARS ON LICENSE:**

**SOCIAL SECURITY NUMBER:** \_\_\_\_\_

**DATE OF BIRTH (MANDATORY):** \_\_\_\_\_ **SEX:** \_\_\_\_\_ **RACE:** \_\_\_\_\_

**\*THE INFORMATION PROVIDED ABOVE IS FOR THE PURPOSES OF INITIATING A BACKGROUND CHECK AND WILL NOT BE USED BY THE PROSPECTIVE EMPLOYER IN THE HIRING DECISION\*\***

I understand that the information that I have provided is for the purposes of a background check only and that NationCheck, LLC is not the Employer but a background screening company, not owned or operated by the Employer. I further acknowledge that my date of birth, sex and race are to be used for investigative purposes by NationCheck, LLC where this search criteria may be required by certain agencies listed in the top paragraph of this form and shall not be used for the purpose of making a hiring decision. By signing this authorization I am also authorizing the use of the credit card information listed below for payment purposes.

**CALIFORNIA, OKLAHOMA, and MINNESOTA RESIDENTS ONLY:** If you are a current California, Oklahoma, or Minnesota resident and would like to request a copy of your Consumer Report or Investigative Report, please check the box. This report may include character and reputation information obtained through personal interviews.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_