



APPLICATION FOR EMPLOYMENT

All Applicants must be US Citizens or eligible to work on our government contracts.

We are an Equal Opportunity Employer. No question on this application is intended to be discriminatory under any applicable Federal, State or Local Fair Employment Practices Law. Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, religious persuasion, material status, political belief, disability or veteran status.

PERSONAL INFORMATION

<i>Last Name</i>	<i>First</i>	<i>Middle</i>	<i>Date of Application</i>
<i>Street Address</i>			<i>Home Telephone</i> ()
<i>City, State, Zip</i>			<i>Business Telephone</i> ()
<i>Are you legally eligible to work in the United States?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No		<i>Have you ever applied to or been employed by Space Vector Corporation?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

EMPLOYMENT INTERESTS

<i>Position Desired</i>	<i>Date Available</i>	<i>Will you work overtime if asked?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Are you available for full-time work?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If not, what days and hours can you work?</i>		<i>Type of Employment Desired</i> <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary
<i>How did you learn of our organization? (Ad, Agency, Employee referral, walk-in or other. Please be specific)</i>		

EDUCATION INFORMATION

<i>School Level</i>	<i>Name and Location of School</i>	<i>Course of Study</i>	<i>Number of Years completed</i>	<i>Degree or Diploma</i>
College/University				
High School				
Elementary				
Other (Business/Trade, etc.)				

SKILLS

If Applicable for the Position for Which You Are Applying

<i>Typing Speed</i>	<i>10 key by Touch</i>	<i>Foreign Languages (indicate proficiency to speak, read and write)</i>
<i>wpm</i>	<input type="checkbox"/> <i>Yes</i> <input type="checkbox"/> <i>No</i>	

PC Skills (Indicate software used)

Other Skills

Do you have any experience, qualifications or special skills which make you especially suited for the position which you are applying? (Explain)

EMPLOYMENT HISTORY

(Start with Most Recent Employer)

1	<i>Company Name</i>		<i>Phone</i> ()	<i>From: Mo./Yr.</i>	<i>To: Mo./Yr.</i>	
	<i>Street Address</i>		<i>City, State, Zip</i>			
	<i>Job Title</i>		<i>Description of Duties</i>		<i>Reason for Leaving</i>	
	<i>Name of Supervisor</i>				<i>May we contact this employer?</i> <input type="checkbox"/> <i>Yes</i> <input type="checkbox"/> <i>No</i>	
2	<i>Company Name</i>		<i>Phone</i> ()	<i>From: Mo./Yr.</i>	<i>To: Mo./Yr.</i>	
	<i>Street Address</i>		<i>City, State, Zip</i>			
	<i>Job Title</i>		<i>Description of Duties</i>		<i>Reason for Leaving</i>	
	<i>Name of Supervisor</i>				<i>May we contact this employer?</i> <input type="checkbox"/> <i>Yes</i> <input type="checkbox"/> <i>No</i>	
3	<i>Company Name</i>		<i>Phone</i> ()	<i>From: Mo./Yr.</i>	<i>To: Mo./Yr.</i>	
	<i>Street Address</i>		<i>City, State, Zip</i>			
	<i>Job Title</i>		<i>Description of Duties</i>		<i>Reason for Leaving</i>	
	<i>Name of Supervisor</i>				<i>May we contact this employer?</i> <input type="checkbox"/> <i>Yes</i> <input type="checkbox"/> <i>No</i>	
4	<i>Company Name</i>		<i>Phone</i> ()	<i>From: Mo./Yr.</i>	<i>To: Mo./Yr.</i>	
	<i>Street Address</i>		<i>City, State, Zip</i>			
	<i>Job Title</i>		<i>Description of Duties</i>		<i>Reason for Leaving</i>	
	<i>Name of Supervisor</i>				<i>May we contact this employer?</i> <input type="checkbox"/> <i>Yes</i> <input type="checkbox"/> <i>No</i>	

ACKNOWLEDGEMENT

A copy of this document is the same as an original.

Please read carefully, initial each paragraph, and sign below.

Initial	<i>I understand that this application or the interviewing process is not intended to be a contract of employment, nor does this application obligate Space Vector Corporation in any way if Space Vector Corporation decides to employ me.</i>
Initial	<i>I authorize Space Vector Corporation to make any investigation of my personal history and financial and credit report* through any investigative or credit agencies or bureaus of thier choice. I authorize Space Vector Corporation to undertake an investigative consumer report whereby information is obtained through personal interviews with neighbors, friends, or others with whom I am acquainted. This inquiry, if made, may include information as to my character, general reputation, personal characteristics and mode of living. I understand I have the right to make a written request within a reasonable period of time to receive detailed information about the nature and scope or any such investigative report that is made.</i>
Initial	<i>I hereby fully waive any rights or claims I have, or may have, against any person, school, current and/or former employers, and their agents, employees and representatives, and any damages that may directly or indirectly result from the use, disclosure or release of any such information by any person or party, whether such information is favorable or unfavorable to me. I further waive any claim against Space Vector Corporation as a result of any information which is obtained in this investigation.</i>
Initial	<i>In consideration of employment, I agree to obey the rules and standards of Space Vector Corporation. I understand and agree that, if I am hired as an employee of Space Vector Corporation, my employment is at-will, which means that I myself and the company retain the right to terminate the employment relationship at will, at any time, with or without cause.</i>
Initial	<i>I understand that as a condition of employment, I will be required to take a post-offer/pre-employment physical exam, which will include a drug screen. I further understand that at any time during my employment, I may be required to take a physical examination which may include an alcohol and drug test if management reasonably suspects a condition exists. I authorize all providers of health care who examine me to disclose to Space Vector Corporation or its agents, all medical information revealed during such examinations. I further authorize Space Vector Corporation to disclose such information to any other persons, if at any time my medical condition is an issue in any proceeding by myself or others. In the event that I have a disability which will affect my ability to take the test, I will inform the company so that reasonable accommodations can be made. Space Vector Corporation requires medical documentation concerning the need for accommodations.</i>
Initial	<i>I understand that all offers of employment are conditioned upon my providing satisfactory documentary proof of my identity and the legal right to live and work in the United States.</i>
Initial	<i>I hereby acknowledge that I have read the above statements and understand them and I certify that I, the undersigned applicant, have personally completed this application. I also certify, that the facts contained in this application (or any resume or other documents submitted) are true and complete to the best of my knowledge. I understand that any misrepresentation or omissions now or in the future will disqualify me from further considerations for employment, and will be justification for my dismissal from Space Vector Corporation.</i>
<i>Applicant Signature:</i>	
<i>Date:</i>	