



APPLICATION FOR EMPLOYMENT

MetaWorld Civil Consulting, LLC is an equal opportunity employer. They comply with all State, Federal, and other laws concerning discrimination in employment. No question on this application is intended to elicit information in violation of any such law nor will any information obtained in response to any question be used in violation of any such law. MetaWorld is a Drug-Free Workplace. Under the provisions of Sec. 440.102, Fl. Stats., applicants for certain positions and employees injured in the course of employment or reasonably suspected of being under the influence of drugs or alcohol will be tested.

POSITION INFORMATION:

Position Applying For: _____

What hours are you willing to work? _____

Would you be able to work weekends? Yes No

Are you willing to travel for the job? Yes No

When would you would you be able to start? _____

Are you legally eligible for employment in this country? Yes No

Type of employment desired: Full time Part time Temp

Desired salary: _____ per _____

How did you hear about this job? _____

PERSONAL INFORMATION

First Name Middle Initial Last Name

Current Address:

Street and Apt. # City State Zip Code

Permanent Address (if different from above):

Street and Apt. # City State Zip Code

Telephone: _____ E-mail: _____

Social Security #: _____ Do you have a current FL drivers license? Yes No

NOT NECESSARY UNTIL
REQUESTED

Last Name: _____ First Name: _____ Middle Initial: _____

Have you been convicted of a felony in the past 7 years? Yes No

If you answered yes, please explain:

Have you ever served in the U.S. Military? Yes No

If yes, please provide the following information:

Branch of Service: _____ Rank at time of separation: _____

I served from _____ to _____.

Special Honors:

Skills:

Please summarize any training, languages, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying:

Computer:

Languages Spoken (other than English):

Other:

EMPLOYMENT HISTORY:

Present or Most Recent Employer

Employer: _____ Address: _____

Your Position: _____ Salary: _____

Duties: _____

Dates of Employment: _____ to _____

Supervisor: _____ Name _____ Title _____ May we contact? Yes No

Reasons for Leaving: _____

Last Name: _____ First Name: _____ Middle Initial: _____

Prior Employer

Employer: _____ Address: _____

Your Position: _____ Salary: _____

Duties: _____

Dates of Employment: _____ to _____

Supervisor: _____ May we contact? Yes No
Name Title

Reasons for Leaving: _____

Prior Employer

Employer: _____ Address: _____

Your Position: _____ Salary: _____

Duties: _____

Dates of Employment: _____ to _____

Supervisor: _____ May we contact? Yes No
Name Title

Reason for leaving: _____

REFERENCE RELEASE AUTHORIZATION:

By my signature below, I hereby authorize any person, educational institution, or company I have listed as a reference on my employment application or in my Résumé to disclose in good faith any information they may have regarding my qualifications and fitness for employment. I will hold Ghyabi & Associates, any former employers, educational institutions, and any other persons giving references free of liability for the exchange of this information and any other reasonable and necessary information incident to the employment process.

Signature: _____ Date: _____

Last Name: _____ First Name: _____ Middle Initial: _____

EDUCATION

High School

Name and Address

Did you graduate? Yes No Years completed: _____.

If you did not graduate, did you receive your GED? Yes No

Special honors or awards: _____

Technical or Vocational School

Name and Address

Did you graduate? Yes No Years Completed: _____.

Degree or Certification: _____ Specialty: _____

Special honors or awards: _____

College or University

Name and Address

Did you graduate? Yes No Years completed: _____.

Degree: _____ Major: _____

Special honors or awards: _____

Personal References:

Please list the name, address and telephone number of three references other than relatives or prior employers:

Name and Address:	Phone Number:	Years Known:
_____	_____	_____
Name and Address:	Phone Number:	Years Known:
_____	_____	_____
Name and Address:	Phone Number:	Years Known:
_____	_____	_____

I hereby certify that the information contained in this application and in any resume provided by me or any party representing my interests is correct and complete to the best of my knowledge. I understand that any false statements, representations or omissions made by me on this application, any supplement, or on a resume, will be sufficient grounds for rejection of this application or discharge from employment.

Last Name: _____ First Name: _____ Middle Initial: _____

If am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and that the employers reserve the same right to terminate my employment at any time, with or without cause and without prior notice. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the employers, other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

I understand that the employers will not refuse to hire a qualified individual with a disability simply because of that person's need for a reasonable accommodation as required by the Americans with Disability Act.

If I am hired, I understand that I will be required to provide proof of identity and authorization to work. I also understand that this is a Drug-Free Workplace, and that applicants for certain positions and all employees injured in the course of employment or reasonably suspected of being under the influence of drugs or alcohol will be tested.

My signature below acknowledges that I have read the foregoing and that I agree to the above-stated terms.

Signature: _____ **Date** _____