EMPLOYMENT APPLICATION

Please complete the entire application.

Employer Information

1.

Employer:	JFS Secured Staffing
Address:	31 Dover st
City/State/ZIP:	Brockton, Massachusetts
02301 Telephone	1-508-215-7302
and employees without	S Secured Staffing to provide equal employment opportunities to all applicants out regard to any legally protected status such as race, color, religion, gender, disability or veteran status.
2. Applicant Int	Formation
Applicant Full Name	:
Home Address:	
City/State/ZIP:	
Number of years at t	his address:
Daytime phone:	Evening phone:
Mobile phone:	
Social Security Num	ber:
Driver's License (Sta	te/Number):
3. Emergency (Contact
Who should be conta	acted if you are involved in an emergency?
Contact Name:	
Relationship to you:	
Address:	
City/State/ZIP:	
Daytime phone:	Evening phone:
4 T1D ''	A 1' 1E
	Applied For:
Full or Part 7	Fime?
5. Salary Desire	ed: \$ per

6.	Are you at least 18 year	s old?	Yes	No		
7.	How will you get to wor	k?				
8.	Are you willing to work any shift, including nights and weekends? Yes No If no, please state any limitations:					
9.	If applicable, are you available to work overtime? Yes No					
10.	If you are offered employment, when would you be available to begin work?					
11.	If hired, are you able to submit proof that you are legally eligible for employment in the United States? Yes No					
	nry Service: Yes No					
	alized Training:					
12.	Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:					
13.	Please list two personal references:					
	Name	Phone		Occupation		
	Name	Phone		Occupation		

CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize JFS Secured Staffing to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

I HAVE CAREFULLY READ THE ABOV AND AGREE TO ITS TERMS.	E CERTIFICATION AND I UNDERSTAND
APPLICANT SIGNATURE	DATE