



EVORA GROUP

APPLICATION FOR EMPLOYMENT

Name: (First, Middle, Last) _____ Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Email Address: _____

Position Applied For: _____

Date Available to Start Work: _____ Hourly Rate/Salary Desired: _____

Do you have a legal right to be employed in the US? Yes No

Proof of identity and eligibility will be required upon employment

Are you over 18? Yes No

If no, you may be required to provide authorization to work

Are you open to travel? Yes No Amount: _____

Do you know anyone who works for our company? Yes No If yes, who? _____

Are you able to perform the essential functions of the job for which you are applying, with or without reasonable accommodation? Yes No

PREVIOUS EMPLOYERS

Place an X by the employer(s) you do not want us to contact. List the most recent first.

Company Name: _____ Job Title: _____

Address: _____ Contact Name: _____ Phone/Email: _____

Employed From: _____ To _____ Reason for Leaving: _____

Primary Duties: _____

Company Name: _____ Job Title: _____

Address: _____ Contact Name: _____ Phone/Email: _____

Employed From: _____ To _____ Reason for Leaving: _____

Primary Duties: _____

Company Name: _____ Job Title: _____

Address: _____ Contact Name: _____ Phone/Email: _____

Employed From: _____ To _____ Reason for Leaving: _____

Primary Duties: _____



EVORA GROUP

EDUCATIONAL BACKGROUND

High School, Name & Location: _____ Did you Graduate? Yes No

College, Name & Location: _____ Did you Graduate? Yes No
Degree/Course of Study: _____

Graduate School, Name & Location: _____ Did you Graduate? Yes No
Degree/Course of Study: _____

Vocational/Other Training, Name & Location: _____ Did you Graduate? Yes No
Degree/Course of Study: _____

Military Experience: _____

Continuing Education: _____

Certifications/Licenses: _____

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, explain: _____

REFERENCES

Provide the names of three persons not related to you, who you have known at least one year.

Name: _____ Years Known: _____
Business: _____ Phone/Email: _____

Name: _____ Years Known: _____
Business: _____ Phone/Email: _____

Name: _____ Years Known: _____
Business: _____ Phone/Email: _____

Evora Group provides equal employment opportunities to all individuals without regard to race, religion, color, sex, sexual orientation, gender identity, age, national origin, disability, veteran status, or any other protected characteristic as established by federal, state, or local law.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for Evora Group to hire me. If I am hired, I understand and agree that employment can be terminated either with or without cause, and either with or without notice, at any time by either the employee or Evora Group.

I attest with my signature below that I have given Evora Group true and complete information on this application. No requested information has been concealed. I authorize Evora Group 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 a denial of employment or immediate termination.

Applicant's Signature: _____ Date: _____