

Equal Opportunity Employer

We are an equal opportunity employer, and we do not and will not discriminate on the basis of race, religion, national origin, sex, age, disability, marital status, sexual orientation, or status as a disabled veteran. Information provided on this application will not be used for any discriminatory purpose.

Provide all information requested

Your completed application form will be maintained in our active files for six (6) months from the date of application. You may submit a new application at any time.

Applicant Information

Last name		First name		MI	For personnel use only	Date of application
Street address					Type(s) of work desired	Social Security number
City		State		ZIP	Phone	Email
How were you referred to M&A? <input type="checkbox"/> College <input type="checkbox"/> Advertisement <input type="checkbox"/> Employment agency <input type="checkbox"/> M&A employee—name: <input type="checkbox"/> Open house <input type="checkbox"/> Walk-in <input type="checkbox"/> Other—describe:						
Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No				If no, are you authorized to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No				If yes, explain:		

Employment Record

List all previous employers, starting with present or most recent. Include self-employment and summer and part-time jobs. If more space is required, please continue on a separate sheet. You may attach a resume, but complete this application as well.

Previous company/employment (most recent)		Type of business		Type or classification of job	
Street address			Phone number		Brief description of job duties
City		State		ZIP code	
Supervisor's name			Phone number		
Base salary		Dates worked			
		From: To:			
Reason for leaving					
Previous company/employment		Type of business		Type or classification of job	
Street address			Phone number		Brief description of job duties
City		State		ZIP code	
Supervisor's name			Phone number		
Base salary		Dates worked			
		From: To:			
Reason for leaving					
Previous company/employment		Type of business		Type or classification of job	
Street address			Phone number		Brief description of job duties
City		State		ZIP code	
Supervisor's name			Phone number		
Base salary		Dates worked			
		From: To:			
Reason for leaving					

Previous company/employment		Type of business	Type or classification of job
Street address		Phone number	Brief description of job duties
City	State	ZIP code	
Supervisor's name		Phone number	
Base salary	Dates worked From: To:		
Reason for leaving			
Previous company/employment		Type of business	Type or classification of job
Street address		Phone number	Brief description of job duties
City	State	ZIP code	
Supervisor's name		Phone number	
Base salary	Dates worked From: To:		
Reason for leaving			

Educational History

School name	Location (city, state)	Major course or subject	Dates attended		Graduated		Degree
			From	To	Yes	No	
High school							
Technical/trade (after high school)							
College (list all attended)							
Other education/training							

Outside Activities

Exclude those indicating race, color, religion, sex, national origin, age, or handicap.

Professional memberships, certificates, or licenses held

Past and present civic or cultural activities—include offices held

Principal hobbies

Special Skills

Typing speed (words per minute)

Computer software (list title of software, type of experience, and skill level)

Computer hardware (list name of hardware, type of experience, and skill level)

Languages (indicate whether spoken and/or written and proficiency level)

Other relevant skills

Military Record

Branch of service

From

To

Present military affiliation: None Reserve (active) Reserve (inactive)

Kinds of training and duty while in service

Professional/Work References

List two past supervisors and one person (not a relative) who have knowledge of your qualifications for the position for which you are applying.

Table with 5 columns: Name, Title/relationship, Address (street, city, state, ZIP code), Phone (+ area code), Occupation

May we contact your present employer? Yes No

Wage or salary required

Date available

I hereby certify that the answers and other information on this application are true and correct and that I understand any misrepresentation or omission of facts on my part will be justification for separation from the company's service, if employed. I understand that my employment may be contingent upon receipt of an alien registration number, verification of birth, and any other pertinent information bearing upon my employment, and that my continued employment depends upon the will of the company or myself.

Signature

Date

If any of your educational or employment records are under other than the above name, please provide other names.

Please submit your completed application and resume to:

Monaco & Associates Incorporated
1243 SW Topeka Blvd., Suite B
Topeka, KS 66612

Or e-mail your application to dave@monacoassociates.com.