

# Application for Student Employment

ASC-470-S (10/18)



*If you are seeking regular employment (i.e., not participation in a student program), please complete the "Application for Employment," Form ASC-470.*

## PERSONAL

LAST NAME		FIRST NAME		MIDDLE NAME
STREET ADDRESS		CITY	STATE/PROVINCE	ZIP CODE
HOME TELEPHONE	OTHER #	EMAIL		
MOBILE TELEPHONE	FAX	EMAIL		

Are you currently authorized to work in the U.S.? Yes    No	Do you now or will you in the future require sponsorship for employment visa status to work for the company? Yes                      No
Will you be able to provide proof of identification and employment authorization in the U.S. immediately upon starting work? Yes    No	

Indicate if you or your spouse have any relatives who k cf _UiASC cf ]tg subsidiaries as an employee or through an employment agency:	FULL NAME	RELATIONSHIP	COMPANY (ASC, AAC, SRI, SPII, APM)
How were you referred to the company? Employment agency    Print advertisement    ASC website Company employee    Internet search    Other: _____		Describe referral/source in detail or provide employee name:	

## PREVIOUS ASC EMPLOYMENT AND EMPLOYMENT INTERESTS

Have you worked at ASC or any of its subsidiaries previously?	Yes    No	If YES: Yearly? Company and Department/Division?	Date available for employment:
Briefly describe the type of work for which you're most qualified:			

## EDUCATION AND TRAINING

TYPE OF SCHOOL	NAME	CITY, STATE / PROVINCE, COUNTRY	DATES ATTENDED (MM/YY)		DEGREE RCV'D (Y/N) OR # OF HOURS	GRAD DATE (MM/YY) / MAJOR
			FROM	TO		
High School Diploma G.E.D.						
College or University; Business, Trade, Industrial, or Other Schools; Special Courses or Seminars	CURRENT:				# CREDIT HRS COMPLETED (DOES NOT INCLUDE CURRENT SEMESTER):	EXPECTED GRAD DATE (MM/YY): MAJOR:
	PREVIOUS:				DEGREE RCV'D? Yes No IF NO, # OF HOURS:	GRAD DATE (MM/YY): MAJOR:
	PREVIOUS:				DEGREE RCV'D? Yes No IF NO, # OF HOURS:	GRAD DATE (MM/YY): MAJOR:

SCHOLASTIC HONORS:

PROFESSIONAL ACTIVE LICENSES AND/OR CERTIFICATES AND EXPIRATION DATE(S):

## ACKNOWLEDGEMENT

Please note that ASC is obligated to comply with all United States export control and embargo/sanctions laws and regulations, including, but not limited to, the International Traffic in Arms Regulations, 22 CFR Parts 120-130 (ITAR), administered by the US Department of State, the Export Administration Regulations, 15 CFR Parts 730-774 (EAR), administered by the US Department of Commerce, and those regulations administered by the US Office of Foreign Assets Control, 31 CFR Parts 500-598. In order to enable ASC to comply with such laws and regulations, applicants receiving a conditional offer of employment will be required to provide ASC with information regarding the country(ies) of applicant citizenship, permanent residence, asylee status, and refugee status (if applicable).

*Notice to applicants for positions in Massachusetts: It is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.*

**Please acknowledge the items below and sign the application.**

Initial: \_\_\_\_\_ I agree to submit to legally permissible drug and/or alcohol testing if requested. I agree that any offer of employment is contingent on my receiving a negative test result.

Initial: \_\_\_\_\_ I understand that the Company may require me to successfully pass a background check. The background check may include, but is not limited to, a criminal record check. I agree to complete the requisite authorization form for the background check. I hereby release all parties from any liability in connection with the provision and use of such information. I understand that my actual employment depends on satisfactory reports from this background check.

Initial: \_\_\_\_\_ I grant the Company permission to contact my schools, professional organizations, and/or former employer(s). I hereby release all parties from any liability in connection with the provision and use of such information.

Initial: \_\_\_\_\_ I recognize that this employment application is not an offer of employment. I agree that if I am hired by the Company, I will be an at-will employee, meaning that either the Company or I may end the employment relationship at any time, for any reason, with or without notice. Nothing in this application and nothing communicated to me at any time changes this at-will status.

Initial: \_\_\_\_\_ I further understand and agree that, if hired, my wages, hours, working conditions, job assignment(s), and compensation rate(s) will be subject to change by the Company at any time, for any reason or no reason.

I agree to be bound by the terms and conditions stated in this application, which contains all the understandings between the parties concerning the topics addressed herein. Furthermore, I certify that all the information furnished on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time.

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SIGNATURE OF APPLICANT

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DATE