

APPLICATION FOR EMPLOYMENT

Brown Equipment Company is an equal opportunity employer and does not discriminate against otherwise qualified applicants based on race, age, color, sexual orientation, gender identity, national origin, religion, disability, or veteran status.

ERSONAL INFORMATION	ON			DATE		
Applicant's Name (Last, Firs			You Over 18 Years ge ☐ Yes ☐ No			
Present Address	City and	State and Zip		Pho	ne Number	
Position Applying For			☐ FT ☐ PT ☐ Temporary			
Date You Can Start	Desired Salary		How Did You He	How Did You Hear About Us / Referred by?		
Email Address						
Are you legally authorized t Will you be able to provide	proof of your id			re hired? 🗖 Yes	□ No	
DITENTIONAL BACKED	UIIND					
	OUND	# of Yrs Completed	Diploma ☐ Yes ☐ No ☐ GED	Major / Subj	ect Studied	
High School / City & State						
High School / City & State College/Vocational / City &	State	Completed # of Yrs	Yes □ No □ GED		ed	
High School / City & State College/Vocational / City & College/Vocational / City & Other Training or Degrees /	State State	# of Yrs Completed # of Yrs	Graduated Yes No GED Graduated Yes No Graduated	Degree Earn	ed	
High School / City & State College/Vocational / City & College/Vocational / City & Other Training or Degrees /	State State City & State	# of Yrs Completed # of Yrs Completed # of Yrs Completed # of Yrs Completed	Graduated Yes No Graduated Graduated Graduated Yes No	Degree Earn	ed	
High School / City & State College/Vocational / City & College/Vocational / City &	State State City & State	# of Yrs Completed # of Yrs Completed # of Yrs Completed # of Yrs Completed	Graduated Yes No Graduated Graduated Graduated Yes No	Degree Earn	ed	

(You need not disclose membership in professional organizations that may reveal information regarding race, color, creed, sex, religion, national origin, ancestry, age, disability, marital status, veteran status or any other protected status.)

	f this position with or withou se specify what accommodat es No s of employment	MM/YY) from	
Employer Name Supervisor Employer Name	Employer Address Duties / Responsibilitie Employer Address	Position s	Ending Salary Reason for leaving
Supervisor Employer Name	Duties / Responsibilitie Employer Address	s	Reason for leaving
Supervisor t Employer Name	Duties / Responsibilitie Employer Address	s	Reason for leaving
t Employer Name	Employer Address		
		Position	Ending Salary
Supervisor	Duties / Responsibilitie		
Supervisor	Duties / Responsibilitie		
	Duties / Responsibilities		Reason for leaving
Employer Name	Employer Address	Position	Ending Salary
Supervisor	Duties / Responsibilitie	Duties / Responsibilities	
Employer Name	Employer Address	Position	Ending Salary
Supervisor	Duties / Responsibilitie	s	Reason for leaving
ed or asked to resign from	a job?		
	Employer Name Supervisor	Employer Name Employer Address Supervisor Duties / Responsibilitie	Employer Name Employer Address Position Supervisor Duties / Responsibilities

DRUG FREE WORKPLACE

In order to preserve the safety, health and well-being of its staff, Brown Equipment Company is committed to a Drug Free workplace. The Company will utilize drug tests to prevent hiring or rehiring individuals who use illegal drugs and to prevent employing individuals whose use of drugs presents a risk or unsafe or unsatisfactory job performance.

APPLICANT'S STATEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and I authorize Brown Equipment Company to verify their accuracy and to obtain reference information on my work performance. I hereby release Brown Equipment Company from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information. I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment nor anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

Signature of Applicant		Date:	
COMPANY USE ONLY:			
Hired: □ Yes □ No	Start Date:		
Printed Name of Supervisor/Manager	 Signature	 Date	



United Companies will provide the Social Security Administration (SSA) and, if necessary, the Department of Homeland Security (DHS), with information from each new employee's Form I-9 to confirm work authorization.

IMPORTANT: If the Government cannot confirm that you are authorized to work, this employer is required to provide you written instructions and an opportunity to contact SSA and/or DHS before taking adverse action against you, including terminating your employment.

Employers may not use E-Verify to pre-screen job applicants or to re-verify current employees and may not limit or influence the choice of documents presented for use on the Form I-9.

In order to determine whether Form I-9 documentation is valid, this employer uses E-Verify's photo screening tool to match the photograph appearing on some permanent resident and employment authorization cards with the official U.S. Citizenship and Immigration Services' (USCIS) photograph. If you believe that your employer has violated its responsibilities under this program or has discriminated against you during the verification process based upon your national origin or citizenship status, please call the Office of Special Counsel at 1-800-255-7688 (TDD: 1-800-237-2515).