Jade Wolf Operations, LLC (210) 596-4122 Email: Admin@jwolfops.com

www.jwolfops.com

# JADE WOLF OPERATIONS, LLC

"We are proud to be an Affirmative Action and Equal Opportunity Employer"

# **APPLICATION**

Name:		·	Today's Date:	
First	Middle	Last		
Position:				
Present Phone (	)	V	Vork ( )	
Permanent Phone (	( )			
Are you eligible for	employment in	the United States?	Yes No_	
Were you previous	ly employed by t	this company? Yes	No	
If yes, give position	(s) you will need	I to fill out a REHIRE	FORM	
Do you have anything JWO?	ing on your back	ground that would o	ause you concern foi	being employed with
*Conviction of a cr	ime will NOT re	sult in automatic dis	qualification.	
REFERRAL SOUR	CE:			
How did you hear a	bout JWO?			·
What are your sala	ry requirements	?		
What hours and da	ys are you availa	able to work?		
	<u>PERS</u>	ONAL REF	<u>ERENCES</u>	
PLEASE GIVE THRE	•	EXCLUDING RELATIV VE KNOWN AT LEAS		PLOYERS, WHOM YOU
NAME	ADDRESS	PHONE	OCCUPATION	YEARS KNOWN
1.		( )		
		( )		
2.				
		( '		

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# **EDUCATION**

Education	Name and Address	Years	Yea	rs	Did you	Received	GPA
	of School	Attended	Compl	eted	Graduate	Degree In	
High School	City		1	2	Yes	Degree	
			3	4	No	Major	
	State						
College/ University/	City	From	1	2	Yes	Degree	
Vocational		То	3	4	No	Major	
	State					,	
Graduate	City	From	1	2	Yes	Degree	
School		То	3	4	No	Major	
		10	3	4	INO	iviajoi	
	State						
(Specify)	City	From	1	2	Yes	Degree	
		<b>T</b> -	2	4	N	N.4-1	
		То	3	4	No	Major	
	State						

Please describe the reason you feel that you are the best qualified candidate for this position (Knowledge, years of experience, special skills, training, experience, span of control, abilities)	

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# **EMPLOYMENT HISTORY**

PLEASE GO BACK 10 YEARS – Provide all information, if you need additional space, please use the back.

1.)	Employer					
	Immediate Supervisor					
	Address					
	City/State/Province/Zip					
	Dates Employed (Mo./Day/ Yr.): From	/	/	To	/	/
	Salary					
	Reason for Leaving					
2.)	Employer					
	Immediate Supervisor					
	Address					
	City/State/Province/Zip					
	Dates Employed (MO./Day/Yr.): From	/	/	To	/	/
	Salary					
	Reason for Leaving					
3.)	Employer					
	Immediate Supervisor					
	Address					
	City/State/Province/Zip					
	Dates Employed (MO./Day/Yr.): From	/	/	To	/	/
	Salary					
	Reason for Leaving					
4.)	Employer					
	Immediate Supervisor					
	Address					
	City/State/Province/Zip					
	Dates Employed (MO./Day/Yr.): From					
	Salary					
	Reason for Leaving					
	Salary					

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# **EMPLOYMENT REFERENCE**

The individual whose signature appears below has applied for employment and has submitted your name as a former employer for reference purposes.

Due to the critical nature of our responsibility to our organization and clients, any consideration of this individual by this agency is dependent upon receipt of satisfactory references. Please be assured that your response will be kept in strictest confidence. Thank you. Date:\_\_\_\_\_\_ Agency Representative:\_\_\_\_\_ I hear by authorize you to fulfill the above request for information. Date:\_\_\_\_\_ Applicant Signature:\_\_\_\_ TO BE COMPLETED BY APPLICANT AND MAILED/FAXED DIRECTLY TO JWO Applicant's Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_ City: State: Zip Code: Phone: ( ) TO BE COMPLETED BY APPLICANT AND MAILED/FAXED DIRECTLY TO JWO Position Held: Employment Dates From:\_\_\_\_\_\_\_To:\_\_\_\_\_\_ Reason for Leaving: Resigned Terminated Temporary Employee Is the Applicant eligible for re-hire? Yes No If no, please explain PERFORMANCE EVALUATION SUPERIOR ABOVE AVERAGE BELOW POOR AVERAGE AVERAGE QUALITY OF WORK QUANTITY OF WORK CLINICAL COMPETENCE JUDGEMENT ATTITTUDE/INTERPERSONAL SKILLS INITIATIVE TEAMWORK/COOPERATION LEADERSHIP ABILITY ATTENDENCE & PUNCTUALITY

PERSONAL APPEARANCE

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# JADE WOLF OPERATIONS, LLC.

THE FOLLOWING INFORMATION REQUEST IS NEEDED FOR A LEGALLY PERMISSIBLE REASON AND BUSINESS NECESSITY:

### Please read carefully:

In submitting this application for employment, I understand that an investigation may be made whereby information is obtained regarding my character, previous employment, general reputation, educational background, credit record and/or criminal history, I authorize anyone possessing this information to furnish it to Jade Wolf Operations, LLC and/or a 3<sup>rd</sup> party company upon request and I release anyone so authorized. Jade Wolf Operations, LLC and any 3<sup>rd</sup> party company from all liability and damages whatsoever in furnishing, obtaining or using said information.

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from employment, whenever it is discovered.

The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law.

I understand that I agree for a period of 90 days following date on which my assignment with the Company terminates, I will not directly or indirectly solicit any for the Company's clients for services or products which I offered clients or prospective clients on behalf of the Company while employed by the Company. This 90 day agreement not to solicit the Company's clients as just discussed will be limited to employee's solicitation of such clients where I am currently, or have been sent to, on an assignment.

I represent or warrant that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant	Date
Agency Representative	Date

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# JADE WOLF OPERATIONS, LLC

### DRUG FREE ENVIRONMENT POLICY

It is the policy of Jade Wolf Operations, LLC to provide its staff, to the best of its ability, with a working environment that is free of the problems associated with the abuse and misuse of drugs and alcohol. Jade Wolf Operations, LLC is committed to the philosophy of maintaining an alcohol and drug free workplace in order to promote a safe and healthy work environment and to promote the safety and well being of its clients, visitors, and staff members. To satisfy these responsibilities, Jade Wolf Operations, LLC must establish a work environment where its employees are free from the effects of drugs, alcohol, or other jobimpairing substances.

As a result, Jade Wolf Operations, LLC will not accept any staff member reporting for work under the influence of alcohol or illegal drugs, or the use or possession by a staff member on company premises (which includes any location that the staff member, the public, or other staff members, or the sale of any such item, is strictly prohibited.

Each staff member is required to report the use of medically authorized drugs or other substances that may impair job performance to his or her immediate supervisor and provide proper written medical authorization from a physician to work while using such authorized drugs. It is the staff member's responsibility to determine from the physician whether or not the prescribed drug would impair his or her job performance.

Where Jade Wolf Operations, LLC has a reasonable suspicion that a staff member is under the influence of alcohol or drugs, the staff member in question will be asked to submit to discovery testing to identify any involvement with alcohol or drugs. Any accident involving property damage or physical injury may also be cause for discovery testing.

A staff member who is found to be under the influence of, or impaired by alcohol, controlled or illegal drugs, or other substances covered by this policy as stated above, is subject to disciplinary action including immediate suspension or termination. A staff member who refuses to submit to discovery testing for alcohol and drugs may be subject to immediate suspension or discharge.

Jade Wolf Operations, LLC., recognizes its commitment and its responsibility to its staff members by seeking to provide, an opportunity for staff members to deal with drug and alcohol related problems. Other treatment programs for drug and alcohol problems may be available through the health and welfare providers selected by individual staff members. The discontinuation of any involvement with alcohol or drugs is an essential requisite for participation in any treatment program.

As a result of disciplinary action arising from a drug or alcohol problem, a staff member may be required to participate in and meet all of the guidelines set forth, which will be provided to the staff member at his or her request. Once guidelines are set forth, the staff member will not be able to accept employment with registries or staffing agencies, therefore the staff member will not be able to accept assignments from Jade Wolf Operations, LLC. Or any other agency.

Violation of this policy I	by any staff men	າber may resul	lt in appropriate	disciplinary	action, up to	and possibly
including discharge from	m employment.					

Print NameDate:	Print Name	Signature	Date:
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JWO is an Equal Opportunity Employer. As required by law, we must record certain information to be made a part of our Affirmative Action Program.

Applications for employment are also invited to participate in the Affirmative Action Program by reporting their status as disabled, disabled veteran, veteran of the Vietnam era or other minority. In extending tis invitation you are also advised that: (a) workers (applicants) are under no obligation to respond, but may do so in the future if they choose; (b) responses will remain confidential within the Human Resources Department; and (c) responses will be used only for the necessary information to include in our Affirmative Action Program. We are a company that values diversity. We actively encourage women and minorities to apply. Refusal to provide this information will have no bearing on your application and will not subject you to any adverse treatment.

Please complete the information requested below. Thank you for your cooperation.

## **Section 1: General Application Information**

Name:	Date:
Position applied for:	

# Section 2: Please check (4) all that apply (See reverse for definitions)

Race or Ethnic Identity	Gender	Veteran Status
D Hispanic or Latino	D Male	D Vietnam Era Veteran
D White (not Hispanic or Latino)	D Female	D Special Disabled Veteran
D Black or African American (not Hispanic or Latino)		D Other Protected Veteran
		D Recently Separated Veteran
D Native Hawaiian or Pacific Islander		
(not Hispanic or Latino)		D Armed Forces Service Medal
		Veterans
D Asian (not Hispanic or Latino)		D Individual with Disabilities
D American Indian or Alaskan Native (not Hispanic or Latino)		D individual with Disabilities
D I do not to Self-Identify		
Signature:		

# **ADDITIONAL PAGE FOR SUPPLEMENTAL INFORMATION**

# **END OF APPLICATION**