



Job Application

404 S Harbor City Blvd
Melbourne, FL 32901



Personal Information

Name: Last		First		MI	Phone
Street Address / City / State / Zip:				Email	
Are you entitled to work in the United States?		Are you 18 or older?		Date of Birth	
Have you ever been convicted of a felony or been incarcerated in connection with a felony in the past seven years? If yes, please explain.					
Military Service?	Branch:		Are you a veteran?		War
What position are you applying for?		How did you hear about this position?		Days & hours available:	Overtime, if necessary? <input type="checkbox"/> Yes <input type="checkbox"/> No
Expected hourly rate:	Expected weekly earnings:		Date available:		

Work Experience

	Current or Most Recent	Prior	Prior
Employer:			
Address:			
City/State/Zip:			
Telephone:			
Name of Immediate Supervisor:			
Dates of Employment:			
Position/Job Title:			
Pay:			
Reason for Leaving:			
May we contact?:			

Education

	Name/Location	Last Year Completed	Degree	Major
High School		9 10 11 12		
College/University		1 2 3 4		
Trade School				
Other				
List any applicable skills, training or proficiencies:				

Disclaimer – By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal, if hired. I also provide consent for former employers to be contacted regarding work records.	Signature:	Date:
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APPLICANT'S STATEMENT



(Initial each numbered item as read)

1. _____ The information that I have provided on this application is accurate to the best of my knowledge and may be verified by Frog Bones LLC or its agents.
2. _____ I authorize all the schools, persons and organizations named in this application to provide any relevant information in their possession or knowledge to the agents of Frog Bones LLC, for use in deciding whether or not to offer me employment and specifically waive any required written notification. I hereby release Frog Bones LLC, my former employers and all other persons from any and all claims, demands, or liabilities arising out of or in any way related to such inquiry or disclosure.
3. _____ I understand that Frog Bones LLC is committed to maintaining a drug and alcohol-free work place. Accordingly, I may be subject to a pre-employment blood test, urinalysis or other drug/alcohol screening. I further understand that if employed, I may be subject to such a drug and alcohol screening if the Frog Bones LLC has reasonable suspicion to believe that I am under the influence of a drug or alcohol. My consent to submit to such a test is required as a condition of employment and my refusal to consent shall result in a refusal to hire or, if already employed, termination.
4. _____ I understand and agree that any misrepresentation or omission of facts in this application will be justification for refusal or termination of employment, regardless of the time elapsed before discovery.
5. _____ I understand and agree that the employment for which I am applying for is at-will and such employment may be terminated at any time with or without cause, without prior notice, by either myself or Frog Bones LLC. There will be no agreement, express or implied between Frog Bones LLC and me for any specific period of employment, nor for continuing or long- term employment, unless made in writing, signed by an authorized representative of Frog Bones LLC.
6. _____ I have placed my signature in the space provided below only after I have completed the entire application to the best of my ability and have carefully read the statements above.
7. _____ I authorize Frog Bones LLC to conduct a criminal background check on me.
8. _____ I will submit to scheduled blood toxicology tests to determine how much lead exposure I am receiving during my daily duties at Frog Bones.
9. _____ I will submit to a blood toxicology test to determine a baseline of lead exposure before I will be hired.

Applicant Name (Print): _____

Applicant Signature: _____

Date: _____