

### **Application for Employment**

No question on this application is asked for the purpose of limiting or excluding any applicant. Qualified applicants are considered for employment, and employees are treated during employment without regard to race, color, ethnicity, religion, age, sex, sexual orientation, national origin, disability, veteran status, marital or familial status, citizenship, genetic information, or any other protected status under federal, state or local law (per Executive Order 11246 - <a href="https://www.dol.gov/ofccp/regs/statutes/eo11246.htm">https://www.dol.gov/ofccp/regs/statutes/eo11246.htm</a>).

This application Applied For/Location	cation is to be cor	•		- '	-	
	····					_
Name	(First)	(Middle	Date of <i>i</i>	Application MM	I/DD/YYYY	_ (Last)
Please list other names you			,			
Home Address(Number, S	Street City State Zin			<del></del>		
(Number, 3	street, City, State, Zip	)				
Home Phone Number (		Alternate Nur	mber ()_			
Length of time at Present A	ddress, (Years) (Month	<u>ns</u> )				
If at present address for les ten-year period (use addition			addresses an			ost recent
Address	City	State	Zip Code	Dates of (MM/YY) -	Residence	
				(141141) 11)		
Referral Source	•			•		_ _
Advertisement   Wall		nt Agency	] Employee	Relative		
Specific Name of Referral S	Source:					
		_				
Have you ever filed an app Have you ever been emplo			JYes ∟ ∕es □ No	∐ No o		
Are you a citizen of the Ur States under the Immigrat				be employed		
Your legal status regarding Department of Homeland S your lawful employment sta	Security's (DHS) E-ve					roper proof
Are you available to work?	☐ Full Time ☐	Part Time	☐ Shift Wor	rk    Overtir	me	
Are you able to perform the ☐ Yes ☐ No	e essential functions	of the position	applied for wi	ithout accommo	odation?	
Are you on a lay-off status a			□ No			
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of



Do any of your relatives currently work for Urban Strategies?						
If yes, please list name(s	3)					
Are you related to any m	nember of the Urban Stra	ategies B	oard of Direct	ors? 🗆 Yes 🗆 No		
If yes, please list name(s	s)					
Employment Experience  List each work experience you have had for at least the last 10 years. Begin with your present or most recent position. Include volunteer activities, military assignments (such as military reserve or National Guard duty), and periods of unemployment.  May we contact your current employer?   Yes  No (reason)						
1) Employer						
1) Employer		Dates MM/YY		Work Performed		
lab Titla	Dhara #	From To		(Please be specific)		
Job Title	Phone #					
Address		Hourly Rate/Salary Starting Final				
Supervisor		Ctarting	, i i i i i			
Reason for Leaving						
2) Employer						
		Dates	MM/YY	Work Performed		
Job Title	Phone #	From	То	(Please be specific)		
Address		Hourly Rate/Salary Starting Final				
Supervisor		0.00	, ,			
Reason for Leaving				<u> </u>		
3) Employer		Dates	MM/YY	Work Performed		
lab Tilla	Dhara #	From	То	(Please be specific)		
Job Title	Phone #					
Address		Hourly Rate/Salary				
Supervisor		Starting	Final			
Reason for Leaving						

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4) Employer		D-	1	484007	\^/o#	l. Danfarmand	
				MM/YY		k Performed	
Job Title	Phone #	Fr	om	То	(Plea	ase be specific)	
JOB THE	T HOHE #						
Address							
				Rate/Sala	ıry		
Cupardoor		Sta	arting	Final			
Supervisor							
Reason for Leaving							
5) Employer				44.4007		- D ( )	
			Dates MM/YY From To			Work Performed	
Job Title	Phone #	Fro	om	То	(Plea	ase be specific)	
THE THE	T HOLIC #						
Address							
			Hourly Rate/Salary		ıry		
Cuparicar		Sta	arting	Final			
Supervisor							
Reason for Leaving		•			•		
Have you ever been disc	charged (fired) or	asked to re	esign 1	rom any	☐ Ye	s No	
If yes, give details of each	If yes, give details of each occurrence						
	_						
		ducation a		raining raduate	Dograd	Major Subject or	
School Name and Loo	ation	Number of Years Attended		raduate (es/No)	Degree Earned	Major Subject or Total Hours	
High School/GED							
College/University							
College/University							
Describe Specialized Translational Languages, e		eship, Skills	s, and	Job-Rela	ted Extra	Curricular Activities,	
						·····	

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#### **Professional References**

Include minimum of 4 references from former employers, clients, or direct supervisors.

Name	Telephone			
Connection to Applicant & Company				
Occupation	Years Known			
Name	Telephone			
Connection to Applicant & Company	1			
Occupation	Years Known			
Name	Telephone			
Connection to Applicant & Company	1			
Occupation	Years Known			
Name	Telephone			
Connection to Applicant & Company				
Occupation	Years Known			
State any additional information you feel may be helpful to us in considering your application:				

#### NOTIFICATION TO POTENTIAL APPLICANTS:

Prior to hiring, candidates must successfully pass a pre-employment background investigation that will include a fingerprinted criminal history check and other background checks that are federal and state mandated. Background checks can also include social security number trace, verification of work history, education, and driving record.



#### **Applicant Certification**

Read and understand before signing.

I understand that employment and continued employment with Urban Strategies (hereafter referred to as the "Company"), unless the subject of a specific written agreement to the contrary, is employment at will, and may be terminated by me or the Company at any time without notice and for any reason. No commitment for a term of employment shall be inferred or otherwise assumed from any source whatsoever, written or oral, except as herein provided. Employment for any duration, including "lifetime" employment, shall not be valid or binding on the employee or the Company, unless it is expressly set forth in a written document and signed by the employee and the President of the Company. Employment-at-will is a term and condition of employment and continued employment for all persons employed by the Company. The Company may alter, cancel, or add regulations, personnel policies and procedures, terms and conditions of employment, from time to time for any reason in its discretion and without advance notice to any person employed by the Company, except employment at will as a term of employment and continued employment. Recognition of these rights and prerogatives of the Company is a term and condition of employment and continued employment.

I understand that employment and continued employment is conditioned upon verification of all information contained in this application or other pre-employment questionnaires or interviews, including, but not limited to, verification of ability to perform the essential functions of the position with or without reasonable accommodation and of applicable lawful age and legal right to work in the United States as provided under applicable law. I agree to furnish such additional information and complete examinations as may be required to complete my employment file and to verify the information contained therein.

In the event I am given a conditional offer of employment, I understand that employment and continued employment may, in the discretion of the Company be conditioned upon completion of a medical examination. I consent to taking such a medical examination and future examinations as may be required by the Company. Subject to applicable law, such examinations will include urinallysis and/or other testing to determine the presence of illegal substances within the body.

In the event I am given a conditional offer of employment, I understand that I will be required to authorize (a) an investigation of all matters concerning my past employment, work as an independent contractor, credit, character or other activities; and (b) the issuance of any information by any person, company or corporation with respect to any of the above, including statements which may be furnished or obtained concerning my background at any time. I release from any and all liability and responsibility all persons, companies and corporations supplying such information and the Company's agents in obtaining the same. I understand that I may be required to authorize the Company to obtain a consumer report or investigative consumer report, in accordance with applicable law, which authorization is contained in a separate document.

I understand that if employed I will be required to abide by all the rules and regulations of the Company including applicable safety rules, and I agree to use such protective clothing and devices as may be required by the Company.

I understand and agree that any false, misleading, or incomplete information given in my application, interview(s), or other pre-employment documentation, regardless of when discovered by the Company will be sufficient basis for my disqualification for employment or, if already employed by the Company, the termination of my employment with the Company. I agree that the Company shall not be liable in any respect if I am not hired or if my employment is terminated as a result of providing such false, misleading or incomplete information.

I hereby acknowledge that I have read and understood all of the information above written and agree to the terms therein.

This certifies that this application was completed by me, and that all entries on it and information in it are true and complete to the best of my knowledge.

(Applicant's Signature) (Date)

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### Please, send this application to HR@urbanstrategies.us.



www.urbanstrategies.us

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