APPLICATION FOR EMPLOYMENT

Enterprises Inc.

KT ENTERPRISES, INC is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status.

If completing manually, PLEASE PRINT in blue or black ink.

PERSONAL INFORMATION

Last Name: | **First Name** | **Middle Initial** | **Date of This Application**

Address; Number, Street and Unit (if any) | **City** | **State** | **ZIP Code**

Home Phone | **Other Phone** | **Other Phone Type** Mobile Work Other | **Email Address**

Position Sought FT PT | **Date Available** | **Social Security Number**

Have you ever applied to work at KT Enterprises before? Yes No **If yes, when?** | **Are you age 18 or over?** Yes No | **Are you legally eligible for employment in the USA?** Yes No

If offered employment, you will be required to provide documentation to verify eligibility to work in the United States.

EDUCATION

Please indicate education, training, or experience that you believe qualifies you for the position you are seeking.

HIGH SCHOOL

High School Name: | **City** | **State or Country** | **Years Completed** 1 2 3 4 | **Outcome** Diploma GED Neither

COLLEGE or VOCATIONAL SCHOOL

School Name: | **City** | **State or Country** | **Years Completed** 1 2 3 4 | **Degree(s) Earned and Major**

OTHER TRAINING or DEGREE

School Name: | **City** | **State or Country** | **Degree(s) or Certificate(s) Earned**

OTHER TRAINING or DEGREE

School Name: | **City** | **State or Country** | **Degree(s) or Certificate(s) Earned**

Related Experience

EMPLOYMENT HISTORY

List last employer first. Include US military service.

IF ANY EMPLOYMENT WAS UNDER A DIFFERENT NAME, PLEASE LIST THAT NAME BELOW.

MAY WE CONTACT YOUR CURRENT EMPLOYER? **YES** **NO**

MOST RECENT EMPLOYER

EMPLOYER NAME: | **NUMBER AND STREET** | **CITY** | **STATE OR COUNTRY** | **ZIP OR POST CODE**

TELEPHONE | **POSITION** | **DEPARTMENT** | **SUPERVISOR**

DUTIES

SALARY **PER WEEK** **PER YEAR** | **WEEKLY HOURS** **FT** **PT** | **EMPLOYED FROM [MONTH/YEAR]** | **TO**

REASON FOR LEAVING

PRIOR EMPLOYER

EMPLOYER NAME: | **NUMBER AND STREET** | **CITY** | **STATE OR COUNTRY** | **ZIP OR POST CODE**

TELEPHONE | **POSITION** | **DEPARTMENT** | **SUPERVISOR**

DUTIES

SALARY **PER WEEK** **PER YEAR** | **WEEKLY HOURS** **FT** **PT** | **EMPLOYED FROM [MONTH/YEAR]** | **TO**

REASON FOR LEAVING

PRIOR EMPLOYER

EMPLOYER NAME: | **NUMBER AND STREET** | **CITY** | **STATE OR COUNTRY** | **ZIP OR POST CODE**

TELEPHONE | **POSITION** | **DEPARTMENT** | **SUPERVISOR**

DUTIES

SALARY **PER WEEK** **PER YEAR** | **WEEKLY HOURS** **FT** **PT** | **EMPLOYED FROM [MONTH/YEAR]** | **TO**

REASON FOR LEAVING

If you wish to describe additional work experience, attach the above information for each position on a separate piece of paper.

EXPLAIN ANY GAPS IN WORK HISTORY.

IF YOU HAVE EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM A JOB, PLEASE EXPLAIN BELOW:

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize KT ENTERPRISES, INC. to verify their accuracy and to obtain reference information on my work performance. I hereby release KT ENTERPRISES, INC from any and all liability of whatever kind and nature which, at any time, could result from obtaining and basing an employment decision on such information.

I understand that falsified statements of any kind or omissions of facts called for on this application may result in disqualification for consideration for employment or, if already employed, grounds for immediate dismissal.

I understand that should an employment offer be extended to me and accepted, I will fully adhere to the policies, rules and regulations of employment of the Company. However, I further understand that the policies, rules, regulations of employment or statements made during the interview process shall not 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 Company may terminate my employment at any time with or without notice or cause.

SIGNATURE *(type your name)* **DATE**