

PLEASE COMPLETE ALL SECTIONS AND RETURN TO HUMAN RESOURCES AT CAREERS@RIC-CONSULT.COM

PERSONAL INFORMATION			
LAST NAME (PLEASE PRINT)	FIRST NAME	MIDDLE NAME	TODAY'S DATE
PRESENT ADDRESS – NUMBER & STREET	CITY	STATE	ZIP CODE
PREVIOUS ADDRESS – (IF LESS THAN 5 YEARS AT CURRENT ADDRESS)	CITY	STATE	ZIP CODE
E-MAIL ADDRESS	PRIMARY PHONE NUMBER	ALTERNATE PHONE NUMBER	
LIST PREVIOUS NAMES USED IN ORDER TO VERIFY EMPLOYMENT:			

ADDITIONAL INFORMATION		
ARE YOU LEGALLY AUTHORIZED TO WORK IN THE U.S.?		
ARE YOU AT LEAST 16 YEARS OF AGE? _____ ARE YOU 18 YEARS OF AGE OR OLDER? _____ <small>(YOUR RESPONSES ARE VOLUNTARY; HOWEVER, THE COMPANY ADHERES TO MINIMUM AGE LAWS. AGE IS NOT USED AS A QUALIFYING FACTOR FOR EMPLOYMENT OTHER THAN WHERE THOSE LAWS APPLY).</small>		
HAVE YOU EVER PLED GUILTY OR "NO CONTEST" TO, OR BEEN CONVICTED OF, A MISDEMEANOR OR FELONY? IF YES, PLEASE GIVE DATE AND DETAILS		
<small>(ANSWERING YES TO THIS QUESTION DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT. FACTORS SUCH AS AGE AND TIME OF THE OFFENSE, SERIOUSNESS AND NATURE OF THE VIOLATION, AND REHABILITATION WILL BE TAKEN INTO ACCOUNT. DO NOT INCLUDE MINOR TRAFFIC CITATIONS AND ARRESTS OR CONVICTIONS WHICH HAVE BEEN SEALED OR EXPUNGED IN ANSWERING THIS QUESTION.)</small>		
DO YOU HAVE A VALID DRIVER'S LICENSE?	LICENSE NUMBER	STATE

EMPLOYMENT DESIRED		
POSITION DESIRED (PLEASE BE SPECIFIC)	DATE AVAILABLE	DESIRED WAGE
TYPE OF WORK DESIRED FULL-TIME PART-TIME TEMPORARY SEASONAL	PREFERRED SHIFT (HOURS AND DAYS AVAILABLE FOR WORK)	
ARE YOU OPEN TO RELOCATION?		
HAVE YOU EVER WORKED FOR RIC BEFORE? IF YES, PLEASE GIVE DATES	IF YES, WHAT POSITION?	
HOW DID YOU LEARN ABOUT THIS POSITION?	REFERRED BY?	
DO YOU HAVE ANY FRIENDS OR RELATIVES WORKING AT RIC?	IF YES, NAME AND RELATIONSHIP	

GENERAL EMPLOYMENT INFORMATION
ARE YOU CAPABLE OF SATISFACTORILY PERFORMING THE ESSENTIAL JOB DUTIES REQUIRED OF THIS POSITION FOR WHICH YOU ARE APPLYING?
HAVE YOU EVER BEEN TERMINATED OR ASKED TO RESIGN FROM A JOB? _____ IF YES, PLEASE EXPLAIN THE CIRCUMSTANCES.
ARE THERE ANY GAPS IN YOUR EMPLOYMENT HISTORY? _____ IF YES, PLEASE EXPLAIN THE CIRCUMSTANCES.

EDUCATION				
SCHOOL LEVEL	NAME & LOCATION OF SCHOOL	MAJOR FIELD OF STUDY	DATES ATTENDED	YEARS COMPLETED? DID YOU GRADUATE?
HIGH SCHOOL				
COLLEGE TRADE, BUSINESS CORRESPONDENCE SCHOOL				
GRADUATE OR OTHER EDUCATION				
SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK:				
SPECIAL SKILLS OR TRAINING:				
SCHOLASTIC HONORS/LICENSES/CERTIFICATIONS:				
ARE YOU FLUENT IN ANY LANGUAGES OTHER THAN ENGLISH? IF SO, WHAT LANGUAGE(S)?				

THIS SECTION MUST BE COMPLETED IN ITS ENTIRETY, EVEN IF ATTACHING A RESUME

EMPLOYMENT HISTORY			
NAME & ADDRESS OF PRESENT OR MOST RECENT EMPLOYER			
STARTING DATE	SEPARATION DATE	STARTING WAGE	FINAL WAGE
JOB TITLE	DESCRIPTION OF WORK		
MAY WE CONTACT YOUR CURRENT EMPLOYER?	NAME & TITLE OF SUPERVISOR		SUPERVISOR'S PHONE NUMBER
REASON FOR LEAVING			

NAME & ADDRESS OF FORMER EMPLOYER			
STARTING DATE	SEPARATION DATE	STARTING WAGE	FINAL WAGE
JOB TITLE	DESCRIPTION OF WORK		
NAME & TITLE OF SUPERVISOR		SUPERVISOR'S PHONE NUMBER	
REASON FOR LEAVING			

NAME & ADDRESS OF FORMER EMPLOYER			
STARTING DATE	SEPARATION DATE	STARTING WAGE	FINAL WAGE
JOB TITLE	DESCRIPTION OF WORK		
NAME & TITLE OF SUPERVISOR		SUPERVISOR'S PHONE NUMBER	
REASON FOR LEAVING			

ACTIVITIES

IT IS VOLUNTARY TO INCLUDE ACTIVITIES AND ORGANIZATIONS WHICH THE NAME INDICATES RACE, RELIGION, SEX, NATIONAL ORIGIN OF MEMBERS OR EXISTENCE OF DISABILITY. PARTICIPATION IN THESE ACTIVITIES WON'T BE USED IN MAKING THE EMPLOYMENT DECISION.

MILITARY SERVICE

PERIOD OF ACTIVE DUTY	BRANCH OF SERVICE	HIGHEST RANK	DISCHARGE STATUS
DESCRIPTION OF DUITES PERFORMED			

PROFESSIONAL REFERENCES

NAME	RELATIONSHIP	YEARS KNOWN	TELEPHONE NUMBER
NAME	RELATIONSHIP	YEARS KNOWN	TELEPHONE NUMBER
NAME	RELATIONSHIP	YEARS KNOWN	TELEPHONE NUMBER

PERSONAL REFERENCES

NAME	RELATIONSHIP	YEARS KNOWN	TELEPHONE NUMBER
NAME	RELATIONSHIP	YEARS KNOWN	TELEPHONE NUMBER

APPLICANT'S STATEMENT & AGREEMENT

In the event of my employment with RLC, LLC dba Renaissance Infrastructure Consulting (RIC), I will comply with all rules and regulations of RLC, LLC. I understand that RLC, LLC reserves the right to require me to submit to a test for the presence of drugs in my system at any time during my employment, to the extent permitted by law. I understand that should I decline to sign this consent or decline to take any of the above tests, my application of employment may be rejected or my employment may be terminated.

I understand that RLC, LLC may investigate my criminal record. I further understand that RLC, LLC may contact my previous employers and I authorize those employers to disclose to RLC, LLC all records and information pertinent to my employment with them. I authorize the persons named herein as personal references to provide RLC, LLC with any pertinent information that they may have regarding me.

I hereby state that all the information that I provided on this application or any other documents filled out in connection with my employment, and in any interview is true and correct. I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand that if I am employed and such information is later found to be false or incomplete in any respect, my employment may be terminated.

If hired, I agree as follows: My employment and compensation is terminable at-will, is for no definite period, and my employment and compensation may be terminated by RLC, LLC (employer) at any time, for any reason whatsoever, with or without good cause at the option of either RLC, LLC or myself. No implied, oral, or written agreements contrary to the express language of this agreement are valid unless they are in writing and signed by the President of RLC, LLC. No supervisor or representative of RLC, LLC, other than the President of RLC, LLC, has any authority to make agreements contrary to the foregoing. This agreement is the entire agreement between RLC, LLC and the employee regarding the rights of RLC, LLC or employee to terminate employment with or without good cause, and this agreement takes the place of all prior contemporaneous agreements, representatives, and understandings of the employee and RLC, LLC.

If you have any questions regarding this statement, please ask the Human Resources Director before signing. I hereby acknowledge that I have read the above statements and understand the same.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE STATEMENT & AGREEMENT

SIGNATURE OF APPLICANT	DATE
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