

COA Date Received:

Date: _____

Please Print Clearly

APPLICATION FOR EMPLOYMENT

COA is a Drug-Free Employer

Please Answer All Questions. Resumes Are Not A Substitute For A Completed Application.

TO APPLICANT: We appreciate your interest in Combat Ops Arena (COA) and assure you that we are interested in your qualifications. A clear and full understanding of your background and work history will aid us in placing you in a position that best meets your qualifications.

Applicants will be considered without discrimination because of race, color, sex, age, religion, national origin, disability, veteran's status, or any other category protected by applicable law. COA also provides reasonable accommodations to qualified individuals with disabilities in accordance with the Americans with Disabilities Act (ADA) and applicable state and local laws.

Position Applied for _____ Social Security Number _____

Name _____ Telephone Number (_____) _____

Present Address (Street, Apt. or Unit No.) _____

City / State / Zip _____ How Long Here? _____

Are you legally eligible for employment in the United States? Yes No Desired

Salary: _____

Are you seeking Full or Part-time work? _____ What shift? _____

When are you available to begin work? _____

Can you perform in a reasonable and safe manner the activities involved in the position for which you have applied? Yes No

Have you ever been convicted of a crime other than a traffic offense, had adjudication of a crime withheld, pled nolo contendere, or are currently being charged for a crime not yet adjudicated? Yes No

If Yes, state the nature of the offense and the date the event took place. (Answering yes will not necessarily be a bar to employment. Each action/explanation will be weighed/considered in relationship to the position for which you are applying.) _____

List your computer, foreign language skills and work experience which you feel qualifies you for the job for which you are applying: _____

(Driver's License or other), please list the following:

License Number: _____ State of Issuance: _____

License Type: _____

Education	School Name and Location	Course of Study	Graduate?	# of years	Degree/Diploma
High School					
College					
College					
Bus./Tech./Trade					

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LIST BELOW ALL PRESENT & PAST EMPLOYMENT BEGINNING WITH MOST RECENT

Name & Address of Company (<i>Describe business type</i>) _____ _____	<u>Dates Employed:</u> From _____ To _____ Job Title _____
Phone (_____) _____ Supervisor's Name _____ Reason Left _____ Duties _____	<u>Compensation:</u> Start _____ Last _____
Name & Address of Company (<i>Describe business type</i>) _____ _____	<u>Dates Employed:</u> From _____ To _____ Job Title _____
Phone (_____) _____ Supervisor's Name _____ Reason Left _____ Duties _____	<u>Compensation:</u> Start _____ Last _____
Name & Address of Company (<i>Describe business type</i>) _____ _____	<u>Dates Employed:</u> From _____ To _____ Job Title _____
Phone (_____) _____ Supervisor's Name _____ Reason Left _____ Duties _____	<u>Compensation:</u> Start _____ Last _____

I certify that all the information on this application, my resume, and all supporting documents is correct, and I understand that any misrepresentation or omission of any information may result in disqualification from consideration for employment or, if employed, my termination.

I understand that this application is not a contract, offer or promise of employment. If hired, I will be able to resign at any time for any reason. Likewise, my employment can be terminated at any time, with or without any reason. I further understand that if hired, my employment is at will.

I authorize COA, or its agents to investigate all statements contained in this application and/or resume. I further understand that a credit and background check may be made including, but not limited to, consumer credit history, driving record, employment, military, education and general public records which will provide information concerning my character, general reputation and mode of living. I hereby authorize my former employers, educational institutions and individuals named to furnish all information pertaining to my work and educational record. I release my former employers, educational institutions, supervisors, co-workers and references from all liability on account of furnishing information to COA, the client to which I am assigned, and their agents. I further release COA, the client to which I am assigned, and their agents from any liability as the result of such contacts and in connection with obtaining any credit and background checks. Should a credit report be requested, I understand and agree that a separate authorization form will be utilized, as required by law.

If required by law, a copy of this report will be provided to me. I hereby release from liability the employer and its representative for seeking such information and all other persons, corporations or organizations for furnishing such information.

I understand and agree that, as a condition of employment, I will be required to sign a non-compete agreement and/or a conflict of interest statement.

I understand that COA may now have, or may establish, a drug-free workplace or a post-accident drug-testing program. If COA has one now or implements one in the future, and I am offered a conditional offer of employment, I agree to work under the conditions requiring a drug-free workplace. I also understand and agree that I may be subject to urinalysis and/or blood screening or other medically recognized tests designed to detect the presence of alcohol and/or drugs as a condition of continued at-will employment, and following any work-related injury. I also agree to undergo random, fitness for duty, return to work, and reasonable suspicion alcohol and drug testing. Refusal to take such tests when asked may result in termination.

I understand this company hires only U.S. citizens or individuals who are legally eligible to work in the United States.

This application is current for only sixty (90) days. At the conclusion of this time, if you have not heard from COA and still wish to be considered for employment, it will be necessary for you to complete a new application.

Applicant Signature _____

Date _____