

FORMER EMPLOYERS (LIST BELOW LAST FOUR EMPLOYERS. STARTING LAST ONE FIRST.)

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM TO				
FROM TO				
FROM TO				
FROM TO				

REFERENCES: GIVE THREE PERSONS NOT RELATED TO YOU. WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED

PHYSICAL RECORD:

DO YOU HAVE ANY PHYSICAL LIMITATIONS THAT PRECLUDE YOU FROM PERFORMING ANY WORK FOR WHICH YOU ARE BEING CONSIDERED? YES NO
 IF YES, WHAT CAN BE DONE TO ACCOMMODATE YOU LIMITATION?

PLEASE DESCRIBE:

IN CASE OF
EMERGENCY NOTIFY

NAME

ADDRESS

PHONE NO.

*I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THAT THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SHAME TO YOU.

AUTHORIZATION WILL INCLUDE CREDIT AND CRIMINAL CHECKS FOR INDIVIDUALS HAVING ACCESS TO KEYS AND MONEY.

I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINATE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT ANY PRIOR NOTICE.

DATE

SIGNATURE

DO NOT WRITE BELOW THIS LINE

9. DATE HIRED

01. EMPLOYEE NUMBER

07. PROJECT NAME

POSITION

8. DATE BORN

28. MARITAL STATUS

S

M

D

W

29. EXEMPTIONS

STATUS

03 STREET

04. CITY

05. STATE

06. ZIP



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AUTHORIZATION FOR CREDIT AND CRIMINAL HISTORY CHECK

Applicant complete this section

Name _____ Date _____

Address _____

Date of Birth _____

Social Security # _____

Willing to re-locate?: _____ Yes _____ No

(circle area(s) you are willing to relocate to in Michigan)

Northeast Southeast

Northwest Southwest

I hereby authorize Medallion Management, Inc. to investigate my credit status, criminal history, and also agree to furnish any other information relative to my credit and criminal standing past and present; and release the same representatives of Medallion Management, Inc.

Signature: _____

Property Manager complete this section

Please run credit check _____ Run criminal check _____

Property Manager approval: _____ Development Code: _____

Revised 1/01

EQUAL HOUSING OPPORTUNITY
EQUAL OPORUNITY EMPLOYER

