



24. Can you pass a test to detect the use of illegal drugs? yes/no \_\_\_\_\_  
 25. Have you ever been convicted of a felony, or theft related misdemeanor? yes/no \_\_\_\_\_  
 If yes, give details including type of offense, sentence, and dates: \_\_\_\_\_

A conviction will not necessarily be a bar to employment. Facts such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account.

## EMPLOYMENT RECORD

26. List all jobs held in the last TEN (10) years and any other jobs relevant to the position for which you are applying. Major changes in duties or job titles with the same employer should be listed as separate jobs. Start with your PRESENT or MOST RECENT position and work back in years. BE SPECIFIC. If additional space is needed, please use a separate piece of paper. NOTE: We may contact previous employers to verify your description of past duties.

26a. May we contact your present employer regarding your record of employment? yes/no \_\_\_\_\_

JOB ONE (Present or Most Recent Job)	
From _____ To _____	Total Time _____
Employer _____	
Address _____	
City _____	State _____ Zip _____
Telephone ( ) _____	
Job Title _____	Hours Per Week _____
Starting Salary \$ _____	Ending Salary \$ _____
Specific Duties: _____	
_____	
_____	
Number of Employees Supervised _____	
Supervisor's Name & Title _____	
Reason for Leaving _____	

JOB TWO	
From _____ To _____	Total Time _____
Employer _____	
Address _____	
City _____	State _____ Zip _____
Telephone ( ) _____	
Job Title _____	Hours Per Week _____
Starting Salary \$ _____	Ending Salary \$ _____
Specific Duties: _____	
_____	
_____	
Number of Employees Supervised _____	
Supervisor's Name & Title _____	

Reason for Leaving \_\_\_\_\_

JOB THREE	
From _____ To _____	Total Time _____
Employer _____	
Address _____	
City _____	State _____ Zip _____
Telephone (     ) _____	
Job Title _____	Hours Per Week _____
Starting Salary \$ _____	Ending Salary \$ _____
Specific Duties: _____	
Number of Employees Supervised _____	
Supervisor's Name & Title _____	
Reason for Leaving _____	

JOB FOUR	
From _____ To _____	Total Time _____
Employer _____	
Address _____	
City _____	State _____ Zip _____
Telephone (     ) _____	
Job Title _____	Hours Per Week _____
Starting Salary \$ _____	Ending Salary \$ _____
Specific Duties: _____	
Number of Employees Supervised _____	
Supervisor's Name & Title _____	
Reason for Leaving _____	

27. If there is additional information that you want to provide regarding your experience, education, skills, competencies or interest in working for Kohner Properties, Inc., please use the space below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**AUTHORIZATION AND CERTIFICATION  
BY EMPLOYMENT APPLICANT**

Applicant's Printed Name \_\_\_\_\_

For purposes of this certification, the term application includes this employment application form and any supplemental questionnaire, exhibit, resume or biographical sheet submitted by Applicant.

I certify that all information given on this application is true, correct, and complete. I have accounted for all of my work experience, training, and other information requested on this application. I have not withheld any fact or circumstance which is covered by this application.

I understand that any false, misleading, or incomplete information on this application will result in rejection of my application or termination of my employment whenever discovered.

I understand that I may be asked to take job-related written tests applicable for the position for which I am applying. If I refuse to be tested, I understand that I will not be further considered for employment.

If I am considered for employment, I authorize any inquiry to be made about any information contained in this application. I agree to furnish additional information as may be requested; and I authorize Employer and agencies or companies of Employer's choice to investigate all information on this application. I release Employer and all other parties from any claims, liabilities and damages resulting from obtaining or furnishing such information.

I understand that before or after receiving any offer of employment, I may be asked to submit to testing for the current illegal use of drugs by a firm that is chosen and paid for by Employer. I understand that the reason for such testing is that Employer endeavors to operate its business in a safe manner for all employees, customers, residents, visitors and / or guests. The results of such testing will be communicated to Employer or its agents. If I refuse to be tested or if I produce a positive test result for the current illegal use of drugs, I understand that I will not be further considered for employment.

If I am employed, I understand that I will be asked to sign a Federal I-9 form and provide positive proof of my identity and verification of my right to live and work in the U.S.A.

If employed, I agree to abide by Employer's rules, procedures, and policies as modified from time to time, including any drug-free workplace policies. I understand that the job being applied for required reliable attendance and dependable performance during the contemplated working hours. I understand that if employed, I may be required to work various shifts and schedules as directed by my supervisor. I understand that any employment is subject to change in wages, conditions, benefits, and operating policies. I understand that if I am employed, such employment will be for an indefinite period and can be terminated at any time by Employer or myself, without notice and without cause.

I understand that this is an application only and that it does not constitute an offer of employment or an employment contract. As the Applicant named above, I authorize Employer and/or its agents to:

- 1 Obtain verification of any information provided by me in this employment application in any supplemental questionnaire, exhibit, resume, or biographical sheets exhibited by Applicant.
- 2 Obtain information regarding work habits, skills and conduct from my past and present employers, as well as, listed or developed references or institutions.
- 3 Obtain information from law enforcement and other governmental agencies, military authorities, and private companies concerning my conduct, including traffic and criminal violations.
- 4 Obtain information from education institutions concerning my educational records, conduct, and skills.
- 5 Obtain a consumer credit report in conjunction with my application for employment with Wolff Properties.

The information obtained will in no way be used in violation of any federal or state equal employment opportunity law or regulation. I further authorize all institution, agencies, companies or persons referred to above, to give Employer and/or its agents all information requested. I release Employer, its agents and all other parties from any claims, liabilities, and damages resulting from obtaining or furnishing information. A copy of this authorization and release shall be as valid as the original.

Applicant's Signature  Date \_\_\_\_\_  
Drivers License Number & State \_\_\_\_\_ Social Security No. \_\_\_\_\_  
(State Issued Driver's License or Alternative Identification)