

Application Instructions

Please fill out the following application even if you submit a resumé. Each question should be answered completely. No action will be taken on this application until all questions have been answered. Please print legibly or type, except for the required signature. Do not substitute "See Resume" for information requested on the application form.

When you have completed the application, you may save the file as a PDF and send it to <u>jmaki@digline.com</u>. Alternatively, you may choose to print it and mail or hand-deliver it to:

DIGLINE, INC. 8310 W Ustick Rd STE 300 Boise, ID 83704



Application for Employment

Each question should be answered completely. No action will be taken on this application until all questions have been answered. Please print legibly or type, except for the required signature. **DO NOT** substitute "See Resume" for information requested on the application form. All information provided will be available only to persons who have a need to know, or as required by law. DIGLINE, INC. is an Equal Opportunity Employer and will make reasonable accommodation in the application and interview process for any disabled applicant who may need it. This application is valid only for the position listed below.

This application is current only for thirty (30) days, at the conclusion of which time, if you have not heard from us and still wish to be considered for employment, it will be necessary for you to fill out a new application.

NAME:						AY'S DATE:		
	Last	First	Middle	Initial				
PRESENT ADDRESS:						_ Phone:		
	No.	Street	City	State	ZIP		Day	Evening
Email Address:						_		
Position applied for:			When are y	ou availa	ble for emp	loyment?		
Type of employment soug	ht: Full-time	Part-time	Temporary					
After reviewing the job de	scription for the position	on to which you have ap	plied, are you able to	perform t	he essentia	al job function	s with or without r	easonable accommodation?
Yes No								
Have you ever been previ	ously employed by the	Company? Ye	s No					
If Yes, give dates employe	ed and reason for leav	ing:						

Record of Employment

1. Name of Curren	t/Most Recent Emp	bloyer	Address		Telephone		Type of Business	
Dates Employed Rate of Pa		ite of Pay		Reason for Leaving		Sup	pervisor's Name and Title	
From Mo/Yr	To Mo?Yr	Starting	Endin	g				
List the jobs you he	eld, duties performe	ed, skills used or l	earned, ad	vancements	or promotions.			
Mav we contac	t your ourroad	tomployor?		Yes	Νο			

Please explain any gaps:



2. Name of Previous Employer			Address Telephone		Telephone		Type of Business		
Datas Fr			ta af Davi		Dessen for Lessien		0		
Dates Employed		Ra	Rate of Pay		Reason for Leaving		Supe	pervisor's Name and Title	
From Mo/Yr	To Mo/Yr	Starting	Endin	g					
List the jobs you he	eld, duties perform	ed, skills used or l	earned, ad	vancements	or promotions.				
May we contac	t this employ	er?		Yes	No				

Please explain any gaps:

3. Name of Next P	revious Employer			Address	Telephone	1	Type of Business
Dates Employed		Rate	of Pay		Reason for Leaving Supervisor's Name and Title		pervisor's Name and Title
From Mo/Yr	To Mo/Yr	Starting	Endin	g			
		ed, skills used or lear	ned, ad				
May we contac	t this employe	er?		Yes	No		

Please explain any gaps:

4. Name of Next P	revious Employer			Address		Telephone		Type of Business	
		-							
Dates Employed		Rate	of Pay	f Pay Reason for Leaving				Supervisor's Name and Title	
From Mo/Yr	To Mo/Yr	Starting	Endin	g					
List the jobs you held, duties performed, skills used or learned, advancements or promotions.									
May we contac	t this employe	er?		Yes	No				

Have you ever been convicted, entered a plea of no contest, or received a withheld judgment for any criminal offense (misdemeanor or felony)? Yes____ No___ (A conviction will not necessarily disqualify an applicant.) If yes, please explain:

Have any of your prior employers ever disciplined you, including, but not limited to, a written warning, suspension, demotion, or termination of your employment? If so, please explain **each** incident by providing the date of occurrence, disciplinary action taken, facts surrounding the action (*e.g.*, specific policy violation or performance issue), and the name of the employer. If you need additional space, please continue on a separate piece of paper. It is critical that the applicant be upfront in his or her response so that the



* * * Are you under 18 years of age? Yes No				
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Are you authorized to work in the United States? (Federal Law requires proof of identity and employm)		No zation for all new o	employees.)	
For Driving Positions Only: Do you have a valid driv	er's license	? Yes	No	
License Number and State Issued:				
		E	ducation	
Indicate Last Year Completed:			School Name	Major Subjects
High School 1 2	3	4		
College 1 2	3	4		
Other job-related education				

This Employment Application is used to notify me that the nature and scope of an investigation, if one is conducted, could include such general identification information as residence verification, and, as applicable, information concerning my employment, education, general reputation, and character, and that such information may be developed through personal interviews with third parties. Only job-related information developed from such a report will be considered in evaluating my employment application or continued employment. I hereby authorize these persons, companies, organizations, or corporations to answer all questions or release any information regarding the items listed in this paragraph. I hereby release them from any liability and hold them harmless from any claim for releasing any truthful information within their knowledge and/or records.

I authorize the Company to release to any person, firm, entity, or organization with which I may seek employment in the future any truthful information concerning my work experience with the Company. I hereby release and hold the Company harmless from any claim for releasing any truthful information within its knowledge and/or records.

I understand that any job offer that may be extended to me will be contingent upon the successful completion of a drug and alcohol test.

I certify that the answers given by me to the foregoing questions and during any interviews are true and correct without material omissions, and I understand that, if employed, omissions and/or false statements on this application or during any interviews may result in dismissal. I understand and acknowledge that, if hired, my employment is for no definite period and either the Employer or I may terminate our relationship at will at any time, without notice or any reason, and that this employment application does not constitute an employment contract.

I have had an opportunity to have my questions about this statement's content and intent answered, and I understand its terms.

Date

Signature of Applicant