

Application for Employment Opportunity, Inc/Stueber Group, LLC

Opportunity Inc has formed a co-employer relationship with the Stueber Group LLC to be their Professional Employer Organization (P.E.O.). Stueber manages the human resource functions for small and medium sized companies. Applicants hired are co-employed by Opportunity and Stueber.

EEO Policy: Opportunity and Stueber prohibits any employment practice which in any way illegally discriminates against any employee of applicant for employment with respect to compensation, terms, conditions or privileges of employment because of an individual's race, color, religion, national origin, veteran status, marital status, eligibility for military service, sex, age, disability, or any other basis protected by law. Disabled applicants may request any needed accommodation.

PERSONAL INFORMATION

(Please Print)

Date ____/____/____ Social Security # ____ - ____ - ____ Phone _____

Name _____
Last First Middle

Current Address _____
Street City State Zip

Cell or Alternative phone number where you can be reached _____

Email _____ Pager _____

Do you have a valid drivers license? _____ State/License # _____

GENERAL INFORMATION ABOUT EMPLOYMENT DESIRED

Position applying for _____ Full-Time _____ Part-Time

If part-time, hours per week interested in: _____ Are you available for work on weekends? _____

Are you available to work holidays? _____ Days of week you are available to work: _____

Hours you are available to work: _____ Are you available to be on-call? _____

Are you available to work nights? _____ Are you available to work overtime? _____

What date could you start work? _____ Pay desired: _____

Date available to start _____ Salary requirements _____

How did you hear about us? _____

Are you eighteen years of age or over? _____ Yes _____ No

Do you have a legal right to work in the United States? _____ Yes _____ No

Have you been convicted of a felony in the last 10 years? _____ Yes _____ No

(NOTE: No applicant will be denied employment solely on the grounds of a conviction or a criminal offense. The nature of this offense, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

If Yes, please explain below: _____

Are there any currently pending criminal charges against you? ___ Yes ___ No

If so please indicate nature of charges _____

Have you previously worked for any of the Opportunity Inc, UCP, Stueber Group? ___ Yes ___ No

If yes, when _____

EDUCATION

	Name and Location of School	Circle Last Year Completed	Did You Graduate?	Subjects Studied and Degree(s) Received
High School		1 2 3 4	___ Yes ___ No	
Trade, Business, Correspondence School		1 2 3 4	___ Yes ___ No	
College		1 2 3 4	___ Yes ___ No	

EMPLOYMENT HISTORY

Present or Most Recent Position:

Name: _____ Address: _____ Phone: _____

Your Position: _____ Average Hrs/Wk _____ Starting Wage: _____ Ending Wage: _____

Duties: _____

Dates of Employment or Engagement: _____ to _____

Reason for leaving _____

Supervisor Name: _____ Title: _____ May we contact: ___ YES ___ NO

Prior Position:

Name: _____ Address: _____ Phone: _____

Your Position: _____ Average Hrs/Wk _____ Starting Wage: _____ Ending Wage: _____

Duties: _____

Dates of Employment or Engagement: _____ to _____

Reason for leaving _____

Supervisor Name: _____ Title: _____ May we contact: ___ YES ___ NO

Prior Position:

Name: _____ Address: _____ Phone: _____

Your Position: _____ Average Hrs/Wk _____ Starting Wage: _____ Ending Wage: _____

Dates of Employment or Engagement: _____ to _____

Reason for leaving _____

Supervisor Name: _____ Title: _____ May we contact: __YES __NO

Prior Position:

Name: _____ Address: _____ Phone: _____

Your Position: _____ Average Hrs/Wk _____ Starting Wage: _____ Ending Wage: _____

Duties: _____

Dates of Employment or Engagement: _____ to _____

Reason for leaving _____

Supervisor Name: _____ Title: _____ May we contact: __YES __NO

Describe any gaps in employment history: _____

ADDITIONAL EMPLOYMENT QUESTIONS

Describe your experience and/or training as it relates to the position you are applying for: _____

List any Professional Society Memberships: _____

Describe any licenses, certifications, awards, recognition that is relevant to the position you are applying for: _____

REFERENCE CHECK AUTHORIZATION

Please read and initial each paragraph below. If there is any part of this page you do not understand, please ask the interviewer about it before signing the bottom.

_____ I HEREBY CERTIFY that the answers given by me to the above questions and statements are true and correct and hereby authorize Opportunity and the Stueber Group to contact references, past or present employers, persons, schools, law enforcement agencies and any other sources of information which may be relevant to my application for employment. I further authorize my current and former employers to disclose to the company any and all letters, reports and other information pertaining to my employment with them, without giving me prior notice of such disclosure. In addition, I hereby release Opportunity, Inc, the Stueber Group, my current and former employers, and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that if offered employment, the offer may be contingent on my passing a pre-employment alcohol and drug screen. By signing this application, I voluntarily agree to submit to a pre-employment alcohol/drug screen upon request. I understand that failure to pass the alcohol/drug screen will result in withdrawal of the employment offer.

_____ If employed by Opportunity, Inc and the Stueber Group, I agree to abide by all of the work and safety rules on the Company. If employed, I also agree to submit to alcohol or drug testing as a condition of employment. I agree that Opportunity, Inc and the Stueber Group may conduct alcohol or drug screening at their sole discretions with or without notice. I also understand that refusal to submit to an alcohol/drug screen will be considered a voluntary resignation or employment. Also, if employed, I realize that the Companies may conduct post-accident, reasonable suspicion, periodic and/or random drug and/or alcohol testing of its employees. I have read, understand and agree to the above statement.

_____ I understand that nothing contained in the application or conveyed to me during any interview, which may be granted, is intended to create an employment contract, implied or explicit, between Opportunity, Inc, the Stueber Group, LLC, and me. In addition, I understand and agree that if I am employed, my employment relationship with Opportunity and Stueber is strictly voluntary and at our mutual will. I understand that if I am employed, my employment is for no definite period and may be terminated at any time, with or without prior notice, with or without cause or reason, at the option of either myself, Opportunity, or Stueber and that no promises or representations contrary to the forgoing are binding on Opportunity or Stueber unless made in writing and signed jointly by the Board of Directors and myself.

_____ I understand and agree that any future changes in my title, duties, compensation, working conditions, and/or Opportunity/Stueber benefits, policies, and procedures will not alter our at-will agreements.

_____ I understand that if offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the United States on my first day of employment.

_____ If the position applied for requires driving in the course of work, I understand that I will be required to possess a current and valid Wisconsin driver's license and understand that I will be required to provide a copy of my official driving record and proof of insurance. I also understand that any offer of employment is contingent on my ability to be covered by Opportunity's and Stueber's auto insurance, if required for my position.

_____ It is understood and agreed that any misrepresentation, false statement, or omissions by me in the Application will be sufficient reason for rejections of my application or for dismissal at any time during my employment, without liability to Opportunity and Stueber. This includes furnishing a false name or social security number. I have read, understand and agree to the above statement.

_____ I further understand that no representative of Opportunity or Stueber have the authority to enter into any agreement for employment for any specified period of time and that these companies are not guaranteeing employment for anyone. No employment contract is created by virtue of my being hired by these companies, and, if hired, my employment will be at will and may be terminated at any time without prior notice. I have read, understand and agree to the above statement.

_____ I understand that this application will remain on the file for 60 days for consideration. After 60 days, if I am still interested in a position with this Company, it will be necessary for me to complete a new application form.

SIGNATURE HERE _____ DATE _____

PRINT YOUR NAME HERE _____

**VOLUNTARY SELF-IDENTIFICATION
(CONFIDENTIAL - FOR STATISTICAL USE ONLY)**

We are an Equal Opportunity Employer and do not discriminate on the basis of race, color, religion, sex age, national origin, disability, veteran status, sexual orientation or any other classification protected by Federal, state, or local law. The information below will be used only in the compilation of data for Equal Employment Opportunity reporting.

Completion of this data is voluntary and will not affect your opportunity for employment, or terms or conditions of employment, if hired. Identification can be declared at any time prior to, or if applicable, after hire. Please return this page with application.

PLEASE COMPLETE IN FULL: Date: _____ Position Applied For: _____

Name: _____ Social Security #: _____

Sex: Male Female Date of Birth: _____ Applicant's Zip Code: _____

ETHNIC GROUP:

(Please check one of the descriptions below corresponding to the ethnic group with which you most identify.)

___ **American Indian or Alaskan Native** – A person having origins in an of the original peoples of North American and South America (including Central America), and who maintains tribal affiliation or community attachment.

___ **Asian** – A person having origins in any of the original peoples of the East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

___ **Black or African American** – A person having origins in any of the Black racial groups of Africa. Terms such as “Haitian” or “Negro” can be used in addition to “Black or African American.”

___ Native **Hawaiian or Other Islander** – A person having origin any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

___ **White** – A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

___ **Hispanic or Latino (All races)** - A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture of origin, regardless of race.

___ **Hispanic or Latino (White race only)** – A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, and of the White race.

___ **Hispanic or Latino (all other races)** – A person of Mexican, Puerto Rican, Cuban, Central of South American, or other Spanish culture or origin, and of any race other than White.

___ **Race missing or unknown** – Applies to **Applicants only**, where a resume or application that is screened is received without any racial or ethnic identification and no further contact is made with the applicant.

VETERAN STATUS:

(Please check one if it describes your veteran status.)

___ **SPECIAL DISABLED VETERAN:** Means (A) a veteran who is entitled to compensation (or who, but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Department of Veteran Affairs for a disability rated at 10 or 20 percent in the case of a veteran who has been determined to have a serious employment disability or (B) a person who was discharged or released from active duty because of a service-connected disability.

___ **VIETNAM ERA VETERAN:** means a veteran, any part of whose active military, naval, or air service, was during the period August 5, 1964 through May 7, 1975 who (1) served on active duty for a period of more than 180 days and was discharged or released there from with other than a dishonorable discharge, or (2) was discharged or released from active duty because of a service-connected disability. No veteran can be considered to a veteran of the Vietnam era under this paragraph after Dec. 31, 1994.

* Veteran status may be requested only after offer is made.