EMPLOYMENT APPLICATION



Thank you for your interest in a career with Coterie Environmental LLC (Coterie). We appreciate your taking time to complete this application. All applicants will be given equal consideration regardless of race, age, sex, disability, religion, and national origin. Coterie's policy requires that all persons interested in employment with our firm complete a written application for the position in which they are interested. Individuals will not be considered for employment if they exclude any of the following information: 1) the position applied for, 2) information required by law, including social security number and authorization to work in the United States, 3) a complete employment history including the name of employer, dates of employment, and reason for leaving, and 4) signature of applicant.

Sections I through VII are to be completed by the applicant. The remaining sections (VIII through XII) will be completed by Coterie Environmental

Environmental.								
I. APPLICANT INFORMATION								
Position Applying for:								Date:
Last Name:				First:				Middle:
Phone:				E-mail Address:				
Current Street Address:				•				Apartment/Unit #:
City:				State:			ZIP:	
Previous Street Ad	ldress:			•			Apartment/Unit #:	
City:				State:			ZIP:	
Date Available:			Social Sec	curity No.: De			sired Salary:	
Are you a citizen o	f the United St	ates?	YES 🗌	NO 🗌	If no, are you authorized to work in			to work in the U.S.? YES NO
Have you ever wo	rked for this co	mpany?	YES	NO 🗌	If so, when?			
Have you ever been convicted of crime in the past 10 years, excluding misdemeanors, and summary offense, which has not been annulled, expunged, or sealed by a court? *				NO If yes, explain:				
*Note: As a condition of employment, Coterie will conduct a motor vehicle and criminal record background check.								
II. EDUCATION	N							
College: (Undergraduate)				Address:				
From:	То:	Did you gr	aduate?	YES NO Degree:				
College: (Graduate)				Address:				
From:	To:	Did you gr	aduate?	YES	NO 🗌	Degree:		
Business Trade/ Technical School:				Address:				
From:	To:	Did you gr	aduate?	YES NO Degree:				
High School:				Address:				-
From:	То:	Did you gr	aduate?	YES	ES NO Degree:			

III. Previous Employment									
Company:				Phone:					
Address:				Supervisor:					
Job Title: Starting 9				\$	Ending Salary: \$				
Responsibilities:									
From:	То:	Reason for Leavir	ng:						
May we contact your previous supervisor for a reference? YES					NO 🗌				
Company:				Phone:					
Address:				Supervisor:					
Job Title:			Starting Salary:	\$	\$ Ending Salary		: \$		
Responsibilities:									
From:	То:	Reason for Leavir	ng:						
May we contact your previous supervisor for a reference? YES NO									
Company:					Phone:				
Address:					Supervisor:				
Job Title:			Starting Salary:	\$ Ending Sala		Ending Salary:	\$		
Responsibilities:									
From:	То:	Reason for Leaving:							
May we contact your previous supervisor for a reference? YES NO									
IV. MILITARY SERVICE									
Branch:					From:		То:		
Rank at Discharge	:			Type of Discharge:					
If other than honorable, explain:									
V. Professional, Trade, Business, or Civic Associations									
Identify any memberships in professional, trade, business, or civic associations. (Exclude those that would reveal race, religion, national origin, age, disability, ancestry, or other protected status)									

VI. REFERENCES							
Please list two professional references and one character reference.							
Full Name:	Relationship:						
Company:	Phone:						
Address:							
Full Name:	Relationship:						
Company:	Phone:						
Address:							
Full Name:	Relationship:						
Company:	Phone:						
Address:							
VII. ACKNOWLEDGEMENT AND SIGNATURE							
Drug-Free Workplace – All applicants for positions with Coterie will undergo testing for the presence of illegal drugs as a condition of employment. Any applicant with a confirmed positive will be denied employment. Applicants will be required to submit voluntarily to a urinalysis test at a laboratory chosen by Coterie, and by signing a consent agreement will release Coterie from liability. If the physician, official, or lab personnel have reasonable suspicion to believe that the applicant has tampered with the specimen, the applicant will not be considered for employment. Coterie will not discriminate against applicants for employment because of past history of drug abuse. It is the current abuse of drugs, preventing employees from performing their jobs properly, that Coterie will not tolerate. Individuals who have failed a pre-employment test may initiate another inquiry with Coterie after period of not shorter than six (6) months; but they must present themselves drug-free as demonstrated by urinalysis or other test selected by Coterie. I hereby certify that the information contained in this application is true and correct to the best of my knowledge and agree to have any of the statements checked by Coterie, unless I have indicated to the contrary. I authorize Coterie to engage an investigation consumer reporting agency or other investigative entity to report on my credit, reference, qualifications or personal history if they so desire. Furthermore, I release all parties and persons from any and all liability for any damages that may result from furnishing such information to Coterie, as well as from the use or disclosure of such information by Coterie or any of its agents, co-workers, or representatives. I understand that any misrepresentation, falsification, or material omission of information on this application may result in my failure to receive an offer, or if I am hired, my dismissal from employment. In consideration of my employment, I agree to conform to the rules and standards of Coterie amended							
Signature:		Date:					

SUBMIT NOW

VIII. EDUCATION CHECK							
School:				Results:			
School:				Results:			
IX. REFERENCE CHECK							
Company/ Person Contacted:				Results:			
Company/ Person Contacted:				Results:			
Company/Person Contacted:				Results:			
X. REPORT AND TEST RESULTS							
MVR/ Criminal History:				Results:			
Drug Test:				Results:			
XI. INTERVIEW RESULTS							
Desire to Interview YES NO Interviewer(s):							
1 st Interview				Type: Phone Face-to-Face			
Date:		Time:		Ar		rrival Time:	
Comments:							
2 nd Interview				Type: Phone Face-to-Face			
Date:	Time:		Ar		rrival Time:		
Comments:							
XII. HIRING INFORMATION							
Start Date:	Billing Category/ Rate:					Salary:	
Title:				Supervisor:			