

APPLICATION FOR EMPLOYMENT

All applicants are considered for all positions without regard to race, color, creed, religion, sex, national origin, citizenship status, ancestry, age, marital status, veteran status, physical or mental disability, pregnancy, medical condition, sexual orientation, or any other legally protected status. By completing this application, you are seeking to join a team of hardworking professionals dedicated to consistently delivering outstanding service to our customers and contributing to the financial success of the company, its clients, and its employees. Equal access to programs, services and employment is available to all qualified persons. Those applicants requiring accommodation to complete the application and/or interview process should contact a management representative.

(PLEASE PRINT)

Position(s) applied for: _____ Date of application: _____

 Last Name First Name Middle Name

 Address City State Zip Code

 E-mail Address Nickname

 Telephone Number(s)

EMPLOYMENT EXPERIENCE

Please list the names of your present or previous employers in chronological order with present or last employer listed first. Be sure to account for all periods of time including military service and any period of unemployment. If self-employed, give firm name and supply business references. [Add additional page if necessary]

Name and Address of Employer	Dates Employed		Supervisor and Telephone Number	Job Title and Duties	Reason for Leaving
	From Month/Year	To Month/Year			
			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No		
			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No		
			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No		
			May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Have you ever been involuntarily terminated or asked to resign from any job?..... Yes No

If yes, please explain: _____

Please explain any gaps in your employment history: _____

Please list any other experience, job related skills, additional languages, or other qualifications that you believe should be considered in evaluating your qualifications for employment. _____

EDUCATION

Please describe your educational background in the table provided below.

School Name	Years Completed (Circle)	Diploma/Degree (Yes or No)	Describe Course of Study or Major	Describe Specialized Training, Experience, Skills and Extra-Curricular Activities
High School:	9 10 11 12			
College/University:	1 2 3 4			
Graduate/Professional:	1 2 3 4			
Trade or Correspondence:				
Other:				

BUSINESS/PROFESSIONAL REFERENCES

Please list three professional references of individuals who are **not** related to you.

Name & Title	Business Relationship	Telephone Number or Email

CO-WORKER REFERENCES

Please list three people you have worked with who know you well; do not include personal friends or relatives.

Name	Occupation	Relationship (Example: Worked together at ABC Company for 3 years)	Years Acquainted	Telephone Number

GENERAL INFORMATION

1. Have you ever used another name? Yes No
2. Is any additional information relative to name changes, use of an assumed name, or nickname necessary to enable a check on your work and educational record? Yes No

If yes to either of the above, please explain: _____

3. Have you ever worked for this company before?..... Yes No

If yes, please give dates and position: _____

4. Do you have friends and/or relatives working for this company? Yes No

If yes, name(s) and relationship(s): _____

5. On what date are you available to begin work? _____

6. Days/Hours available to work: _____

7. Are you available to work..... Full-time..... Part-time..... Shift Work..... Temporary

8. Minimum salary required.....Per Hour \$ _____ Per Month \$ _____

9. If hired, would you have a reliable means of transportation to and from work? Yes No

10. Can you travel if the position requires it? Yes No

11. Can you relocate if the position requires it? Yes No

12. Are you at least 18 years old?..... Yes No

Note: If under 18, hire is subject to verification that you are of minimum legal age.

13. If hired, can you present evidence of your identity and legal right to live and work in this country? ... Yes No

14. Are you able to perform the essential job functions of the job for which you are applying with or without reasonable accommodation?..... Yes No

Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for qualified applicants/employees to perform essential job functions.

*This Application shall be considered active for a period of time not to exceed **45** days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.*

APPLICANT STATEMENT AND AGREEMENT

Please read and initial each paragraph below. If there is anything that you do not understand, please ask.

_____ In the event of my employment with the Company, I understand that I am required to comply with all rules and regulations of the Company.

_____ I hereby authorize the Company to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the prior employers and references I have listed to disclose to the Company any and all information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Company, my former employers and all other persons and entities from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that I may be subject to a criminal background check and/or credit check prior to and during my employment, and that my employment may be subject to successful completion of these checks, in accordance with legal guidelines.

_____ I understand that I may be subject to screening for the presence of controlled drugs and/or alcohol in my system prior to employment and during my employment, to the extent permitted by law. I voluntarily submit to the controlled drug and/or alcohol screening and understand that the presence of controlled drugs and/or alcohol in my system may disqualify me from employment with the Company.

_____ I understand that any offer of employment may be contingent upon the passing of a physical examination. I consent to the disclosure of the results of the physical examination and related tests to the Company. I understand that should I decline to sign this consent or take any of the above tests, my application for employment may be rejected.

_____ I understand that I may be required to take other tests such as personality tests that measure traits and work habits prior to and during my employment. I understand that should I decline to sign this consent or take any of the above tests, my application for employment may be rejected or my employment may be terminated.

_____ If hired, I understand and agree that my employment with the Company is at-will, and that neither I, nor the Company is committed to continuing the employment relationship for any specific term. I further understand that the Company or I may terminate the employment relationship for any reason at any time, with or without cause, and with or without notice. I understand that the at-will status of my employment cannot be amended, modified, or altered in any way by oral statements or in any other way, but can only be altered by written amendment signed by the Owner/President of this Company.

_____ I understand that the Company is committed to ensuring a safe working environment. I understand that I, and every employee, have a responsibility to prevent accidents and injuries by observing all safety procedures and guidelines and following the directions of my site supervisor. I understand and agree to comply with federal, state, and local regulations related to on-the-job safety and health. A copy of the Company's Injury and Illness Prevention Plan will be provided to me upon my request.

_____ I understand that my employment will be contingent upon signing the Company's Alternative Dispute Resolution Agreement (if applicable), a copy of which will be provided with the Employee Handbook packet.

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge.

_____ I hereby certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

_____ I understand that if I am selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States, and that federal immigration laws require me to complete an I-9 Form in this regard.

_____ I understand that it is my responsibility to verify that the state and federal payroll tax deductions taken on my payroll checks match the information I provided on my completed W-4 form.

_____ I understand that if any term, provision, or portion of this Agreement is declared void or unenforceable, it shall be severed and the remainder of this Agreement shall be enforceable.

MY SIGNATURE BELOW ATTESTS TO THE FACT THAT I HAVE READ, UNDERSTAND, AND AGREE TO BE LEGALLY BOUND TO ALL OF THE ABOVE TERMS.

Signature: _____ Date: _____

Printed Name: _____ City/State: _____

BACKGROUND CHECK AUTHORIZATION

The following information is required by law enforcement agencies and other entities for identification purposes when checking records. It is confidential and will not be used for any other purpose.

Full Legal Name: _____ Social Security #: _____

Other Names You Have Used*: _____

Drivers License #: _____ Issuing State: _____ Date of Birth** (MM/DD/YY): _____

Daytime Phone #: _____ Email address: _____

* In last 7 years. **This information will be used for background screening purposes only and will not be used as hiring criteria.

Address History*	City	State	Zip	County	From/To

Applicant/Employee: Please review the section below, and sign and date where noted on next page.

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

Triad Solutions Inc./SinglePoint Outsourcing Inc. ("the Company") may obtain information about you from a consumer reporting agency in connection with your employment application. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records ("driving records"), verification of your education or employment history, or other background checks. Credit history will only be requested where such information is substantially related to the duties and responsibilities of the position for which you are applying. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by Pre-Employ.com, Inc., Compliance Department, P.O. Box 491570, Redding, California 96049-1570, or by fax to (888) 999-3839, or another outside organization. The scope of this notice and authorization is all-encompassing, allowing the Company to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and throughout the course of your potential employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

New York and Maine Applicants Only: You have the right to inspect and receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency identified above directly. You may also contact the Company to request the name, address and telephone number of the nearest unit of the consumer reporting agency designated to handle inquiries, which the Company shall provide within 5 days.

New York Applicants or Employees Only: Upon request, you will be informed whether or not a consumer report was requested by the Company, and if such a report was requested, informed of the name and address of the consumer reporting agency that furnished your report. By signing below, you also acknowledge receipt of Article 23-A of the New York Correction Law. www.labor.state.ny.us/agencyinfo/PDFs/CorrectionLaw%20Article%2023-A%20_4_.pdf.

Oregon Applicants Only: Information describing your rights under federal and Oregon law regarding consumer identity theft protection, the storage and disposal of your credit information, and remedies available should you suspect or find that the Company has not maintained secured records is available to you upon request.

Washington State Applicants or Employees Only: You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the Company at any time after receipt of this authorization and throughout my employment, if applicable, in connection with or resulting from my application. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, the Company, or insurance company to furnish any and all background information requested by Pre-Employ.com, Inc., Compliance Department, P.O. Box 491570, Redding, California 96049-1570, or by fax to (888) 999-3839, another outside organization acting on behalf of the Company itself in connection with or resulting from my application. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

(Please continue to next page.)

California Only: By signing below, if you are a California applicant, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please mark an "X" here ___ if you would like to receive a copy of an investigative consumer report or consumer credit report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law.

*****CREDIT CHECK ELIGIBILITY REQUIREMENT:** If you are a California applicant or employee, pursuant to Section 1024.5 of the California Labor Code the Company informs you that it will obtain a credit report about you from Pre-Employ.com, Inc., Compliance Department, P.O. Box 491570, Redding, California 96049-1570, (800) 300-1821, if you are seeking to work in one of the following positions: a managerial position; a position in the Department of Justice; a sworn peace officer or other law enforcement officer; a position for which the information contained in the report is required by law to be disclosed or obtained; a position that involves regular access to specified personal information for any purpose other than the routine solicitation; and processing of credit card applications in a retail establishment, such as bank or credit card account information, social security number, or date of birth; a position in which you are, or would be, a named signatory on the bank or credit card account of the employer; authorized to transfer money on behalf of the employer; or authorized to enter into financial contracts on behalf of the Employer; a position that involves access to confidential or proprietary information; a position that involves regular access to \$10,000 or more of cash. If you are not applying for or in one of the above described employment positions the Company will not obtain a consumer credit report on you.

Minnesota and Oklahoma Applicants Only: Please mark an "X" here ___ if you would like to receive a copy of a consumer report if one is obtained by the Company.

New York Applicants or Employees only: By signing below, you also acknowledge receipt of Article 23-A of the New York Correction Law. www.labor.state.ny.us/agencyinfo/PDFs/CorrectionLaw%20Article%2023-A%20_4_.pdf.

Signature of Applicant _____ Date _____

This section is to be completed by management

Company Name: _____ Position Applied For: _____

Will driving be required? Yes No

Please select item(s) requested:

- Standard Background Check (Includes SSN, County Criminal and Federal Criminal Search)
- Credit Check (**Applicant/employee must meet the CREDIT CHECK ELIGIBILITY REQUIREMENTS stated above*****)
- Additional Reports Requested: [] Civil Search [] Education [] Licenses and Credentials [] References
(Please call your HR Specialist to coordinate any additional reports.)

Authorized Signature _____ Date _____

SUMMARY OF RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to: www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, D.C. 20006**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.
 In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.
- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer-reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer-reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer-reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer-reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT.
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.
- States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

TYPE OF BUSINESS:	PLEASE CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word “National” or initials “N.A.” appear in or after bank’s name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word “Federal” or initials “F.S.B.” appear in federal institution’s name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words “Federal Credit Union” appear in institution’s name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator- GIPSA Washington, DC 20250 202-720-7051

NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW

The Company intends to obtain information about you from an investigative consumer reporting agency and/or a consumer credit reporting agency for employment purposes. Thus, you can expect to be the subject of "investigative consumer reports" and "consumer credit reports" obtained for employment purposes. Such reports may include information about your character, general reputation, personal characteristics and mode of living. With respect to any investigative consumer report from an investigative consumer reporting agency ("ICRA"), the Company may investigate the information contained in your employment application and other background information about you, including but not limited to obtaining a criminal record report, verifying references, work history, your social security number, your educational achievements, licensure, and certifications, your driving record, and other information about you, and interviewing people who are knowledgeable about you. The results of this report may be used as a factor in making employment decisions. The source of any investigative consumer report (as that term is defined under California law) will be Pre-Employ.com, Inc., P.O. Box 491570, Redding, California 96049-1570, and (800) 300-1821. The source of any credit report will be Pre-Employ.com, Inc., P.O. Box 491570, Redding, California 96049-1570, or (800) 300-1821.

The Company agrees to provide you with a copy of an investigative consumer report when required to do so under California law.

Under *California Civil Code section 1786.22*, you are entitled to find out from an ICRA what is in the ICRA's file on you with proper identification, as follows:

- In person, by visual inspection of your file during normal business hours and on reasonable notice. You also may request a copy of the information in person. The ICRA may not charge you more than the actual copying costs for providing you with a copy of your file.
- A summary of all information contained in the ICRA's file on you that is required to be provided by *California Civil Code section 1786.10* will be provided to you via telephone, if you have made a written request, with proper identification, for telephone disclosure, and the toll charge, if any, for the telephone call is prepaid by or charged directly to you.
- By requesting in writing a copy be sent to a specified addressee by certified mail. ICRA's complying with requests for certified mailings shall not be liable for disclosures to third parties caused by mishandling of mail after such mailings leave the ICRA's.

"Proper Identification" includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. Only if you cannot identify yourself with such information may the ICRA require additional information concerning your employment and personal or family history in order to verify your identity. The ICRA will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information contained in files maintained on you. This written explanation will be provided whenever a file is provided to you for visual inspection.

You may be accompanied by one other person of your choosing, who must furnish reasonable identification. An ICRA may require you to furnish a written statement granting permission to the ICRA to discuss your file in such person's presence.