



**REFERENCES**

*Provide below 2 people not related to you, whom you have known at least one year*

Name / Address/ Phone	Business	Years Known
Name / Address/ Phone	Business	Years Known

**REQUIRED ACKNOWLEDGEMENT & AUTHORIZATION**

\*\*\*\*\*By signing below you are acknowledging that, you authorize investigation of all statements contained herein & the references & employers listed above to give EMPLOYEE LEASING any & all information concerning my previous employment & any pertinent information they may have, personal or otherwise, & release EMPLOYEE LEASING from all liability for any damage that may result from utilization of such information.

\*\*\*\*\*By signing below you are acknowledging that all information supplied to Employee Leasing by you, the applicant, in written, documented, copied, verbalized and physical documents you have provided for your employment, is true and correct to the best of your knowledge. You also are acknowledging that you are aware that a full and complete Background check may be done and you the applicant give full permission to do so. You understand that any refusal of your background check or any information you have provided is found to be falsely given may be grounds for your dismissal or refusal of your employment.

\*\*\*\*\*Employee Leasing, Inc is an "At-will" Employer ----- At-will employment is a doctrine of American law that defines an employment relationship in which either party can break the relationship with no liability provided there was no express contract for a definite term governing the employment relationship and that the employer does not belong to a collective bargain (i.e. a union). Under this legal doctrine: any hiring is presumed to be "at will"; that is, the employer is free to discharge individuals "for good cause, or bad cause, or no cause at all," and the employee is equally free to quit, strike, or otherwise cease work.

Employee Print Name:

Employee Signature:

Date:

***(Client OFFICE USE ONLY) - DO NOT WRITE BELOW THIS LINE***

Employee's Title:

Position Type: Full Time / Part Time / Seasonal / Temporary: From Date \_\_\_\_\_ to \_\_\_\_\_

1st Date of Work: Rate of pay:

Emp. Pay Scale Type: Hourly / Salary / Piece Work / Commission

Pay Period Freq.: Weekly / Biweekly / Semi Monthly / Monthly

Job Description:

By signing below you are acknowledging that all information and documents you have provided for this employee is true and correct to the best of your knowledge. You are also acknowledging that the employee has not begun work prior to receipt and acceptance of completed documents by our office. APPLICATION IS PENDING APPROVAL

Client Company:

Client Name:

Title:

Client Signature:

Date:

***(Leasing OFFICE USE ONLY) - DO NOT WRITE BELOW THIS LINE***

EMPLOYEE#

CLIENT#

SSN STATUS:

DATE:

FREQ:

WC CODE:

CLASS:

HIRE STATUS:

