

Schedule desired: Full time _____ Part time _____ # of hours per week _____

Could you work overtime? Yes ____ No ____

What date could you start work? _____

Could you travel if required by this position? Yes _____ % of time ____ No _____

Have you ever applied to RSI: _____ If "yes": where _____ when: _____

Have you ever worked at RSI: _____ If "yes": where _____ when: _____

Reason for Leaving: _____

EDUCATION

High School

School Name: _____

City and State _____

Years Completed: _____

Grade Point Average: _____

College

School Name: _____

City and State _____

Degree or # of Years Completed: _____

Major or Subject: _____

Grade Point Average: _____

College

School Name: _____

City and State _____

Degree or # of Years Completed: _____

Major or Subject: _____

Grade Point Average: _____

Graduate School

School Name: _____

City and State _____

Degree or # of Years Completed: _____

Major or Subject: _____

Grade Point Average: _____

List any certificates earned or in progress, and/or any additional training programs not included in your formal education.

List any Professional Affiliations to which you belong (please do not list activities which would indicate age, sex, color, race creed, national origin, religion, marital status, sexual orientation, political belief, or disability):

PREVIOUS EMPLOYMENT

List your current or most recent employment first. Include work related internships, military and volunteer work.

Current Employer: _____

City and State: _____

Telephone Number: _____

Supervisor's Name and Title: _____

Position Title: _____

Reason for Leaving: _____

Salary: _____ per Hour Week Month Year (circle one)

Dates of Employment: From: _____ To: _____

May we contact your employer: Yes _____ No _____

Previous Employer: _____

City and State: _____

Telephone Number: _____

Supervisor's Name and Title: _____

Position Title: _____

Reason for Leaving: _____

Salary: _____ per Hour Week Month Year (circle one)

Dates of Employment: From: _____ To: _____

May we contact your employer: Yes _____ No _____

Previous Employer: _____

City and State: _____

Telephone Number: _____

Supervisor's Name and Title: _____

Position Title: _____

Reason for Leaving: _____

Salary: _____ per Hour Week Month Year (circle one)

Dates of Employment: From: _____ To: _____

May we contact your employer: Yes _____ No _____

Professional References

Name	Title	Company	Phone	Relationship
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Releases and Applicant's Signature

In connection with my application for employment and as a condition of continuing employment, I understand that investigative background inquiries may be made on me including previous employers, schools, consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, work habits, performance, education, compensation, and experience along with reasons for termination of employment from previous employers. Furthermore, I understand that the company may be requesting information from various federal, state, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil and other experiences as well as claims involving me in the files of insurance companies. I authorize without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. I hereby consent to obtaining the above information from RSI and/or any of their agents. This authorization and consent shall be valid in original, fax or copy form.

Initials

All hiring and employment at RSI is at will. I understand this application is not an employment contract, nor can it be used to create one. Employment by RSI has no specific term and may be terminated by the employee or RSI with or without notice. I acknowledge that RSI has not made any promises or representations that differ from those contained in this paragraph.

I understand I must provide satisfactory documents to establish my identity and right to work in the United States, if I am offered a position with RSI, and that failure to provide this evidence will result in the termination of my employment.

I release and agree to hold harmless any individual, company, business institution or government agency from all liability with regard to furnishing information to RSI I agree to release and hold harmless RSI from all liability with respect to the receipt of such information.

I certify that the information I have furnished on this application form is true and complete. I understand that if any misrepresentation has been made by me verbally or in writing, any offer of employment made to me may be withdrawn or my subsequent employment with RSI may be terminated.

Applicant's Signature

Date