



EMPLOYMENT APPLICATION

APPLICANT INFORMATION					
Last Name:		First:		M.I.:	Date:
Street Address:				Apartment/Unit #	
City:		State:		ZIP:	
Phone:		E-mail Address:			
Date Available to start:					
Position Applying for:				Desired Salary Range:	
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	
				YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	

EDUCATION					
High School:			Address:		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
College:			Address:		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:
College:			Address:		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree:

LICENSING, TRADE SCHOOL or CERTIFICATES		
Name:		Issued by:
Number (if applicable)		Expiration
Name:		Issued by:
Number (if applicable)		Expiration:

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

2050 COMMERCE AVE CONCORD, CA 94520 | 925.674.6900 OFFICE | 925.674.6995 FAX | CA Lic 835076

**PREMIER DOOR, HARDWARE, LIFE SAFETY & SECURITY SOLUTIONS:
SUPPLIED, INSTALLED AND SERVICED**



PREVIOUS EMPLOYMENT		
Company:		Phone:
Address:		Supervisor:
Job Title:		
From	To	Reason for Leaving:
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		
Company:		Phone:
Address:		Supervisor:
Job Title:		
From	To	Reason for Leaving:
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		
Company:		Phone:
Address:		Supervisor:
Job Title:		
From	To	Reason for Leaving:
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		

REFERENCES	
Please list three professional references.	
Full Name:	Relationship:
Company:	Phone:
Years known:	
Full Name:	Relationship:
Company:	Phone:
Years known:	
Full Name:	Relationship:
Company:	Phone:
Years known:	

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PLEASE READ CAREFULLY, INITIAL EACH PARAGRAPH AND SIGN BELOW

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 further 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 hereby authorize Opening Technologies, Inc. to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other 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, 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 nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature:

Date: