



NIOWAVE, INC

1012 North Walnut Street
Lansing, MI 48906
Phone: (517) 999-3475
Fax: (517) 999-3626
www.niowaveinc.com

Application for Employment

Niowave, Inc. and its affiliated companies affirm the right of every person to participate in all aspects of employment without regard to race, color, creed, sex, national origin, age, height, weight, disability, veteran status, marital status, citizenship status, or other factors identified and protected by federal, state and local legislation.

Date: _____

Name: _____
Last First Middle

Address: _____
Number Street City State Zip

Phone numbers: () _____ () _____
Primary Number Alternate Number

Have you ever been employed by Niowave? Yes No

Are you 18 years of age or older? Yes No

If offered employment, can you submit proof of your legal right to work in the U.S.? Yes No

Can you perform the essential functions of the job for which you are applying with or without reasonable accommodation? Yes No

Have you been convicted of a crime within the last seven years? Yes No

(The existence of a criminal record does not constitute an automatic bar to employment.) If yes, please provide the date, location, and circumstances, and identify the offense(s) and jurisdiction(s).

Have you registered for Selective Service? Yes No

Are you a U.S. veteran? Yes No

Have you completed the employment survey at <http://tinyurl.com/bq9adw2> for Niowave? Yes No

Are you subject to a confidentiality agreement, trade secret agreement, non-compete agreement or any other similar restriction?

Yes No If yes, please explain: _____

Are you available to work: Part-Time Full-Time Saturday Sunday

If you are applying for a position that requires driving a motor vehicle, please provide the following information:

Do you have valid driver's license? Yes No

Has it been revoked or suspended in the Yes No
last 5 years?

Driver's license number

Expiration date

State of issuance

Work Experience

List each job held in the past seven years, starting with your most recent job. Include military assignments and volunteer activities. Please use an extra sheet of paper if necessary.

Employer or Organization: _____	From: _____
Address: _____	To: _____
Number Street	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
City State Zip	Rate of pay: _____
Supervisor: _____ Phone: () _____	
Position Held: _____ Major Responsibilities: _____	

Reason for leaving: _____	

Employer or Organization: _____	From: _____
Address: _____	To: _____
Number Street	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time
City State Zip	Rate of pay: _____
Supervisor: _____ Phone: () _____	
Position Held: _____ Major Responsibilities: _____	

Reason for leaving: _____	

Employer or Organization: _____

From: _____

Address: _____

To: _____

Number

Street

Full-Time Part-Time

City

State

Zip

Rate of pay: _____

Supervisor: _____ Phone: () _____

Position Held: _____ Major Responsibilities: _____

Reason for leaving: _____

May we contact employers listed above? Yes No If no, please explain:

Education

List each school attended.

High School	City, State	Major	Graduated: <input type="checkbox"/> Yes <input type="checkbox"/> No
College	City, State	Major	Graduated: <input type="checkbox"/> Yes <input type="checkbox"/> No
College	City, State	Major	Graduated: <input type="checkbox"/> Yes <input type="checkbox"/> No
College	City, State	Major	Graduated: <input type="checkbox"/> Yes <input type="checkbox"/> No

List additional skills, training or education that qualifies you for the position for which you are applying:

References

List three business references that are familiar with your work and not related to you.

<u>Name</u>	<u>Address</u>	<u>Phone number</u>	<u>Number of yrs. known reference</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

Certification of Information: I certify that the information given in this application is true and complete to the best of my knowledge. I understand that false, omitted, incomplete or misleading information may result in disqualification from further consideration, or immediate discharge. I agree that Niowave shall not be liable in any respect if my employment is so denied or terminated.

Authorization: I authorize Niowave to make any necessary investigation and inquiries of information in connection with my application for employment. I authorize any school, employer, person or government agency to give Niowave any information they may about me. I agree to release Niowave and all providers of information from any and all liability in making or responding to inquiries in connection with my application.

Conditional Offers of Employment: I understand that all offers of employment are conditional upon satisfactory background and reference checks, acceptable results from a pre-employment production of documents necessary for Niowave to verify identity and work authorizations in accordance with applicable law. I agree that I will not take any action in anticipation of employment until Niowave informs that all conditions placed upon the offer of employment have been satisfied.

Policies and Procedures: If I am employed, I agree to abide by all Niowave policies and procedures including the Principles of Business Conduct and Code of Ethics. I agree that Niowave has the right to unilaterally add, delete or change policies and procedures, including incentive plans and benefits, without prior notice or agreement. Due to the nature of our business, some positions may require overtime.

Employment At-Will: I understand that nothing contained in this application or the granting of an interview is intended to create an employment contract. If an employment relationship is established, I understand that unless otherwise defined by applicable law, my employment is at-will. Employment at-will means that an employee may resign at any time and that Niowave may discharge at any time, with or without notice or cause. I understand that no employment handbook or oral or written statements that I receive during my employment will constitute a contract of employment. I understand that this “at-will” relationship may only be changed if the President specifically acknowledges the change in writing.

Obligations to Previous Employers: I certify that I am not subject to a confidentiality agreement, trade secret agreement, non-compete agreement or other similar restrictions that prohibits me from working at Niowave and its affiliated Companies.

Return of Company Property: If employed, I agree that upon termination of my employment, I will immediately return all Company property, records, and information in my possession.

I have read, understand and agree to the above conditions.

Signature: _____

Date: _____