



## Application for Hamilton Relay Services

### Headquartered at

1001 Twelfth Street • Aurora, NE 68818

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## Application For Employment

### Applicant Note

This application form is intended for use in evaluating your qualifications for employment. This is not an employment contract. Please answer all appropriate questions completely and accurately, if more space is needed please attach additional paper. False or misleading statements during an interview or on this form are grounds for terminating the application process, or if discovered after employment, terminating employment. All qualified applicants will receive consideration without discrimination because of sex, marital status, race, age, creed, national origin or disability.

### Personal Information

Name \_\_\_\_\_ Date \_\_\_\_\_  
last first m.i.

Telephone: Home/Cell \_\_\_\_\_ E-mail \_\_\_\_\_

Address: Street \_\_\_\_\_

City \_\_\_\_\_

State & Zip \_\_\_\_\_

### Position Information

Position you are applying for \_\_\_\_\_ Date you can start \_\_\_\_\_

What category would you prefer (circle) Full-Time Part-Time

What schedules are you available (circle) Weekdays Weekends Evenings Nights Overtime

Referral Source (circle) Internet Newspaper Radio Television

Other \_\_\_\_\_ Personal Contact \_\_\_\_\_

name

### Education

Please circle the highest grade completed: 7 8 9 10 11 12 13 14 15 16 16+

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**High School:** Name \_\_\_\_\_

City/State \_\_\_\_\_ Diploma \_\_\_\_\_

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**College:** Name \_\_\_\_\_ Dates \_\_\_\_\_

City/State \_\_\_\_\_ Degree \_\_\_\_\_

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**Other:** Name \_\_\_\_\_ Dates \_\_\_\_\_

City/State \_\_\_\_\_ Degree \_\_\_\_\_

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### Job Related Information

Yes No Have you been given a job description or had the requirements explained to you?

Yes No Do you understand these requirements?

With Without Can you perform the requirements of this job **with** or **without** reasonable accommodation? **If with**, how would you perform the tasks, and with what accommodation(s)? \_\_\_\_\_

Yes No Are you authorized to work in this country for any employer?

Yes No Have you worked for Hamilton Telecommunications in the past?  
If yes; What division? \_\_\_\_\_ When? \_\_\_\_\_

Yes No Have you ever been convicted of a felony?  
If yes, please explain \_\_\_\_\_

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Please list any skills, licenses or certificates you possess which are job related or which you feel may be of value to our company.

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## Employment History

Please summarize work experience, starting with your present or most recent employer. Answer **all** questions completely (any omission may disqualify you from consideration).

Employer \_\_\_\_\_ Supervisor \_\_\_\_\_

Address \_\_\_\_\_  
street city state zip code

May we contact this employer for a reference? \_\_\_\_\_ May we contact you at work? \_\_\_\_\_

Telephone Number (\_\_\_\_\_) \_\_\_\_\_ Your Job Title \_\_\_\_\_

Dates Employed \_\_\_\_\_ To \_\_\_\_\_  
month year month year

Starting Salary \$ \_\_\_\_\_ per \_\_\_\_\_ Ending salary \$ \_\_\_\_\_ per \_\_\_\_\_

Duties \_\_\_\_\_

Reason for leaving \_\_\_\_\_

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Employer \_\_\_\_\_ Supervisor \_\_\_\_\_

Address \_\_\_\_\_  
street city state zip code

May we contact this employer for a reference? \_\_\_\_\_

Telephone Number (\_\_\_\_\_) \_\_\_\_\_ Your Job Title \_\_\_\_\_

Dates Employed \_\_\_\_\_ To \_\_\_\_\_  
month year month year

Starting Salary \$ \_\_\_\_\_ per \_\_\_\_\_ Ending salary \$ \_\_\_\_\_ per \_\_\_\_\_

Duties \_\_\_\_\_

Reason for leaving \_\_\_\_\_

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Employer \_\_\_\_\_ Supervisor \_\_\_\_\_

Address \_\_\_\_\_  
street city state zip code

May we contact this employer for a reference? \_\_\_\_\_

Telephone Number (\_\_\_\_\_) \_\_\_\_\_ Your Job Title \_\_\_\_\_

Dates Employed \_\_\_\_\_ To \_\_\_\_\_  
month year month year

Starting Salary \$ \_\_\_\_\_ per \_\_\_\_\_ Ending salary \$ \_\_\_\_\_ per \_\_\_\_\_

Duties \_\_\_\_\_

Reason for leaving \_\_\_\_\_

### References

Include only those individuals familiar with your work abilities. Do not include relatives.

1. Name \_\_\_\_\_ Years Known \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

Telephone Number (\_\_\_\_) \_\_\_\_\_ Relationship \_\_\_\_\_

2. Name \_\_\_\_\_ Years Known \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

Telephone Number (\_\_\_\_) \_\_\_\_\_ Relationship \_\_\_\_\_

3. Name \_\_\_\_\_ Years Known \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip Code

Telephone Number (\_\_\_\_) \_\_\_\_\_ Relationship \_\_\_\_\_

### Additional Comments

I hereby certify that the information provided in this application is true, correct and complete. I authorize investigation of all statements contained in this application and I release from liability all persons, companies and corporations supplying such information and agree to indemnify Hamilton Telecommunications against any liability which might result from making such investigation. I fully understand that misrepresentation or omission of facts on this application or other required documents is cause for denial of employment or dismissal if I am employed.

I understand that an offer of employment is contingent upon my ability to establish employment eligibility under the Immigration Reform and Control Act of 1986.

I understand that no contract of employment is created by this application, or by policies and procedures of Hamilton Telecommunications. I agree to comply with the policies and procedures of Hamilton Telecommunications. I understand my employment can be terminated, at the option of either the company or myself.

I have read the above statements. I understand them and I agree with them as conditions of possible employment.

Signature \_\_\_\_\_ Date \_\_\_\_\_

I agree that the information provided is correct and wish to submit this application to Hamilton Telecommunications