



EMPLOYMENT APPLICATION

An Equal Opportunity Employer

Please Print

Date Last Name First Name Middle Initial

Present Address

No. & Street City State Zip

Mobile Phone Home Phone

Position applying for: _____

Personal Information

Have you ever applied to or worked for Wireless Infrastructure Services before? _____
Yes No

If yes, when? _____

Do you have any friends or relatives working for Wireless Infrastructure Services?

Yes No

If yes, state name(s) and relationship:

Name Relationship

Name Relationship

Why are you applying for work at Wireless Infrastructure Services?

If hired, would you have a reliable means of transportation to and from work?
Yes No

Are you at least 18 years old? (If under 18, hire is subject to verification that you are of minimum legal age.)
Yes No

If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country?
Yes No

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation:
Yes No

If no, describe the functions that cannot be performed:

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants / employees to perform essential functions. Hire may be subject to passing a medical examination, and to skill and agility tests.)

Have you ever been convicted of a criminal offense (felony or serious misdemeanor)?
(Convictions for marijuana-related offenses that are more than two years old need not be listed.)

Yes No

If yes, state the nature of the crime(s), when and where convicted, and disposition of the case.

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The nature of the offense, date of the offense, the surrounding circumstances, and the relevance of the offense to the position(s) applied for may, however, be considered.)

Education, Training and Experience

School	Name & Address	No. of years Completed	Graduate?	Degree or Diploma
High School	_____ Name	_____	_____	_____
	_____ Address			
College / University	_____ Name	_____	_____	_____
	_____ Address			
Vocational / Business	_____ Name	_____	_____	_____
	_____ Address			

Employment History

List below all present and past employment starting with your most recent employer (last five years is sufficient). Account for all periods of unemployment. You must complete this section even if attaching a resume.

_____	(_____) _____ - _____
Name of Employer	Telephone No.
_____	_____
Type of Business	Supervisor's Name
_____	_____
Address	City State Zip
_____ to _____	_____
Dates of employment	Starting pay rate Ending pay rate

Your position and duties	

Reason for leaving	

May we contact this employer as a reference?

_____ Yes _____ No

_____	(_____) _____ - _____
Name of Employer	Telephone No.
_____	_____
Type of Business	Supervisor's Name
_____	_____
Address	City State Zip
_____ to _____	_____
Dates of employment	Starting pay rate Ending pay rate

Your position and duties	

Reason for leaving	

May we contact this employer as a reference?

_____ Yes _____ No

References

List below three persons not related to you who have knowledge of your work performance within the last three years.

_____	_____	(____) _____ - _____
First Name	Last Name	Telephone No.
_____	_____	_____
Occupation	Relationship	No. years acquainted
_____	_____	(____) _____ - _____
First Name	Last Name	Telephone No.
_____	_____	_____
Occupation	Relationship	No. years acquainted
_____	_____	(____) _____ - _____
First Name	Last Name	Telephone No.
_____	_____	_____
Occupation	Relationship	No. years acquainted

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 Wireless Infrastructure Services 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.

_____ Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the Company, I am entitled to copies of any such public records obtained by the Company unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

_____ I waive receipt of a copy of any public record described in the paragraph above.

Date

Applicant's Signature

Licenses, Training and Certifications



Please check and list all safety, industry, and professional licenses, training and certifications you have and provide copies to HR to be reviewed at time of interview.

Description	Institution	Expiration Date
___ First Aid	_____	_____
___ CPR	_____	_____
___ Climbing	_____	_____
___ Line Sweep	_____	_____
___ Connector	_____	_____
___ Microwave	_____	_____
___ RF	_____	_____
___ Forklift	_____	_____
___ Aerial Lift	_____	_____
___ Class A License	_____	_____
___ Class B License	_____	_____
___ Desert Tortoise	_____	_____
___ OSHA 10-hr	_____	_____
___ OSHA 30-hr	_____	_____
___ Degree	_____	_____
OTHER:		
_____	_____	_____
_____	_____	_____
_____	_____	_____

Motor Vehicle Record Disclosure and Release Form

In connection with my ongoing employment or my application for employment, should I have or secure a position with JTD Consulting, Inc. dba Wireless Infrastructure Services, I understand that a motor vehicle record, which contains public record information, may be requested. I further understand that such report(s) will contain personal information and public record information concerning my driving record from federal, state, and other agencies that maintain such records, as well as independent services that provide driving record information.

I authorize, without reservation, any party or agency contacted to furnish the above-mentioned information to JTD Consulting, Inc. dba Wireless Infrastructure Services or its agent.

I hereby authorize procurement of my motor vehicle report. If hired, this authorization shall remain on file and shall serve as ongoing authorization for you to procure such reports at any time during my employment **JTD Consulting, Inc. dba Wireless Infrastructure Services' commercial auto insurer and agent will also use this information in conjunction with loss control and safety review efforts.**

Full Legal Name (include middle initial)

Social Security Number

Driver's License Number

State of Issuance

Date of Birth

Signature

Date

CONSUMER DISCLOSURE AND AUTHORIZATION FORM

Disclosure Regarding Background Investigation

JTD Consulting Inc. (the "Company") may request, for lawful employment purposes, background information about you from a consumer reporting agency in connection with your employment or application for employment (including independent contractor assignments, as applicable). This background information may be obtained in the form of consumer reports and/or investigative consumer reports (commonly known as "background reports"). These background reports may be obtained at any time after receipt of your authorization and, if you are hired or engaged by the Company, throughout your employment or your contract period.

HireRight, Inc., or another consumer reporting agency, will prepare or assemble the background reports for the Company. HireRight, Inc. is located and can be contacted by mail at 5151 California, Irvine, CA 92617, and HireRight can be contacted by phone at (800) 400-2761. Information about HireRight's privacy practices is available at www.hireright.com/Privacy-Policy.aspx.

The background report may contain information concerning your character, general reputation, personal characteristics, mode of living, and credit standing. The types of information that may be obtained include, but are not limited to: social security number verifications; address history; credit reports and history; criminal records and history; public court records; driving records; accident history; worker's compensation claims; bankruptcy filings; educational history verifications (e.g., dates of attendance, degrees obtained); employment history verifications (e.g., dates of employment, salary information, reasons for termination, etc.); personal and professional references checks; professional licensing and certification checks; drug/alcohol testing results, and drug/alcohol history in violation of law and/or company policy; and other information bearing on your character, general reputation, personal characteristics, mode of living and credit standing.

This information may be obtained from private and public record sources, including, as appropriate: government agencies and courthouses; educational institutions; former employers; personal interviews with sources such as neighbors, friends and associates; and other information sources. If the Company should obtain information bearing on your credit worthiness, credit standing or credit capacity for reasons other than as required by law, then the Company will use such credit information to evaluate whether you would present an unacceptable risk of theft or other dishonest behavior in the job for which you are being evaluated.

You may request more information about the nature and scope of any investigative consumer reports by contacting the Company. A summary of your rights under the Fair Credit Reporting Act is also being provided to you.

Additional State Law Notices

If you are a California, Maine, Massachusetts, New York or Washington State applicant, employee or contractor, please also note:

CALIFORNIA: Pursuant to section 1786.22 of the California Civil Code, you may view the file maintained on you by HireRight during normal business hours. You may also obtain a copy of this file, upon submitting proper identification and paying the costs of duplication services, by appearing at HireRight's offices in person, during normal business hours and on reasonable notice, or by certified mail. You may also receive a summary of the file by telephone, upon submitting proper identification and written request. HireRight has trained personnel available to explain your file to you, including any coded information, and will provide a written explanation of any coded information contained in your file. If you appear in person, you may be accompanied by one other person, provided that person furnishes proper identification. "Proper identification" includes documents such as a valid driver's license, social security account number, military identification card, and credit cards. If you cannot identify yourself with such information, HireRight may require additional information concerning your employment and personal or family history to verify your identity.

MAINE: You have the right, upon request, to be informed of whether an investigative consumer report was requested, and if one was requested, the name and address of the consumer reporting agency furnishing the report. You may request and receive from the Company, within five business days of our receipt of your request, the name, address and telephone number of the nearest unit designated to handle inquiries for the consumer reporting agency issuing an investigative consumer report concerning you. You also have the right, under Maine law, to request and promptly receive from all such agencies copies of any such reports.

MASSACHUSETTS: If we request an investigative consumer report, you have the right, upon written request, to a copy of the report.

NEW YORK: You have the right, upon written request, to be informed of whether or not an investigative consumer report was requested. If an investigative consumer report is requested, you will be provided with the name and address of the consumer reporting agency furnishing the report. You may inspect and receive a copy of the report by contacting that agency. Please click [here](#) for additional information about New York law, as applicable.

WASHINGTON STATE: If the Company requests an investigative consumer report, you have the right, upon written request made within a reasonable period of time after your receipt of this disclosure, to receive from the Company a complete and accurate disclosure of the nature and scope of the investigation requested by the Company. You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

Authorization of Background Investigation

I have carefully read and understand this Disclosure and Authorization form and the attached summary of rights under the Fair Credit Reporting Act. By my signature below, I consent to preparation of background reports by a consumer reporting agency such as HireRight, Inc., and to the release of such background reports to the Company and its designated representatives and agents, for the purpose of assisting the Company in making a determination as to my eligibility for employment (including independent contractor assignments, as applicable), promotion, retention or for other lawful employment purposes. I understand that if the Company hires me or contracts for my services, my consent will apply, and the Company may obtain background reports, throughout my employment or contract period.

I understand that information contained in my employment or contractor application, or otherwise disclosed by me before or during my employment or contract assignment, if any, may be used for the purpose of obtaining and evaluating background reports on me. I also understand that nothing herein shall be construed as an offer of employment or contract for services.

I hereby authorize law enforcement agencies, learning institutions (including public and private schools and universities), information service bureaus, credit bureaus, record/data repositories, courts (federal, state and local), motor vehicle records agencies, my past or present employers, the military, and other individuals and sources to furnish any and all information on me that is requested by the consumer reporting agency.

By my signature below, I also certify the information I provided on and in connection with this form is true, accurate and complete. I agree that this form in original, faxed, photocopied or electronic (including electronically signed) form, will be valid for any background reports that may be requested by or on behalf of the Company.

California, Minnesota or Oklahoma applicants only: You will be provided with a free copy of any consumer reports or investigative consumer reports obtained on you if you check the box below.

I wish to receive a free copy of the report.

Applicant Last Name _____ First _____ Middle _____
Applicant Signature _____ Date _____