

Please complete all of the sections, "See Resume" should not be substituted for any section on this application.

Employer:	Date		Describe Job Duties Briefly:
	From:	To:	
Address:	Month/Year	Month/Year	
Tel#:			
Job Title:	Hourly Rate/Salary		Reason for Leaving:
	Starting	Final	
Supervisor:			May we Contact Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer:	Date		Describe Job Duties Briefly:
	From:	To:	
Address:	Month/Year	Month/Year	
Tel#:			
Job Title:	Hourly Rate/Salary		Reason for Leaving:
	Starting	Final	
Supervisor:			May we Contact Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer:	Date		Describe Job Duties Briefly:
	From:	To:	
Address:	Month/Year	Month/Year	
Tel#:			
Job Title:	Hourly Rate/Salary		Reason for Leaving:
	Starting	Final	
Supervisor:			May we Contact Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer:	Date		Describe Job Duties Briefly:
	From:	To:	
Address:	Month/Year	Month/Year	
Tel#:			
Job Title:	Hourly Rate/Salary		Reason for Leaving:
	Starting	Final	
Supervisor:			May we Contact Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

Were you employed by any of the above under another name? Yes No If yes, please indicate: _____

Explain any gaps in employment of 3 months or more and give any other information that you believe would assist us in considering you for employment:

PLEASE READ VERY CAREFULLY BEFORE SIGNING BELOW

I understand that, the information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of any facts in my application, resume and any other materials or during any interviews, can be justified for refusal of employment or, if employed, termination from the Company.

I authorize and request that all of my present and former employers and those individuals I have listed as personal references furnish information about my employment record, including a statement of the reason for the termination of my employment, work performance, abilities, and other qualities pertinent to my qualifications for employment, hereby releasing them from any and all liability for damages arising from furnishing the requested information.

I authorize ESS Support Services Worldwide to use any lawful method, in its sole discretion, it deems reasonable and necessary to determine whether an officer, employee, or agent or potential officer, employee or agent has engaged in conduct that would interfere with or adversely affect the business interests of ESS or to determine whether any officer, employee or agent has engaged in conduct warranting disciplinary action. Such investigation may include, but may not be limited to, safety related inquiries, arrest and criminal record inquiries, financial disclosure, finger printing and credit history inquiries.

In consideration of my employment, I agree to comply with the policies, rules, regulations, and procedures of the company and understand that my employment and compensation can be terminated with or without cause or notice, at any time, at the option of either the company or myself. I further understand that no manager or representative of the company, other than the President has any authority to enter into any agreement with me for employment of any specified period of time or to make any agreement different from or contrary to any company policy. I further understand that any such agreement, if made, shall not be enforceable unless it is in writing and signed by me and by one of the individuals designated above.

Signature

Date

NOTE TO INTERVIEWER: This application form should be kept free of any notes, comments or marking concerning the applicant.

VOLUNTARY SUPPLEMENT TO EMPLOYMENT APPLICATION

The information requested below is used by this company only to maintain records required by employers doing business with the Federal Government. **YOU DO NOT HAVE TO ANSWER THESE QUESTIONS TO BE CONSIDERED FOR EMPLOYMENT WITH COMPASS GROUP USA, INC.**

If you do choose to answer these questions, any information supplied by you on this voluntary supplement will not affect your employment opportunities with Compass Group, which is an equal employment opportunity employer.

DATE OF APPLICATION: _____

JOB FOR WHICH YOU ARE APPLYING:

- Manager
- Cook
- Helper
- Other, specify _____

RACE: White Black Hispanic (White Race) Hispanic (Non-White Race)
 Asian/Pacific Islander American Indian/AK Native

SEX: Male Female

DISABILITY: _____

VETERAN STATUS:

1. Disabled Veteran? () Yes () No
2. Campaign Badge Veteran? () Yes () No
3. Recently Separated Veteran (within 12 months.)? () Yes () No

HOW DID YOU HEAR ABOUT THIS POSITION?

1. Agency (List Name): _____
2. Newspaper Ad: _____
3. Friend: _____
4. Walk-In: _____
5. Employee: _____
6. Other: _____

PLEASE **DO NOT** PUT YOUR NAME ON THIS FORM.

THIS INFORMATION WILL BE KEPT SEPARATE FROM YOUR APPLICATION AND WILL NOT BE USED IN MAKING HIRING DECISIONS.