

# Application For Employment

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*Appian is an equal opportunity employer and does not discriminate on the basis of race, color, sex, sexual preference, age, religion, creed, national or ethnic origin, marital status, veteran status, physical handicap, or disability, except where these are bona fide occupational qualifications. All applicants are given equal consideration without regard to the above criteria.*

Date \_\_\_\_\_ Position Applying for \_\_\_\_\_ Desired Hours FT \_\_\_\_\_ PT \_\_\_\_\_

Applicant Name \_\_\_\_\_ SSN \_\_\_\_\_

Current Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Referred by \_\_\_\_\_

Do you have any relatives or close friends working here? Yes \_\_\_ No \_\_\_  
(If "yes", state identity and relationship)

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Are you below the age of 18? Yes \_\_\_ No \_\_\_

Date of Availability \_\_\_\_\_ Desired Salary \_\_\_\_\_

Have you ever been employed by us? Yes \_\_\_ No \_\_\_ If "yes", when? \_\_\_\_\_

Have you ever applied for a position with us? Yes \_\_\_ No \_\_\_ If "yes", when? \_\_\_\_\_

Are you willing to work overtime as necessary? Yes \_\_\_ No \_\_\_

Is there anything that would prevent you from performing in a reasonable and safe manner the activities involved in the position for which you are applying? Yes \_\_\_ No \_\_\_

If "yes", please explain \_\_\_\_\_

Have you ever been convicted of a felony within the last ten (10) years? Do not use expunged record(s) as a basis for answering this question. Yes \_\_\_ No \_\_\_

(An affirmative response will not automatically disqualify you from being considered as a candidate for employment.)

If "yes", please explain \_\_\_\_\_

Are you authorized to work in the US? Yes \_\_\_ No \_\_\_

*Federal laws require that employers hire only individuals who are authorized to be lawfully employed in the United States. In compliance with such laws, all offers of employment are subject to verification of the applicant's identity and employment authorization, and it will be necessary for you to submit such documents as required by law to verify your identification and employment authorization upon employment.*

**Relevant Skills**

Please list any skills which you believe are related to the job for which you are applying:

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**Record of Education**

| School                          | Print Name, Number, Street City,<br>State and Zip for each Listing | Yrs. Completed | Degree | Course of Study |
|---------------------------------|--|----------------|--------|-----------------|
| High School                     |  |                |        |                 |
|                                 |  |                |        |                 |
| College                         |  |                |        |                 |
|                                 |  |                |        |                 |
| Grad School                     |  |                |        |                 |
|                                 |  |                |        |                 |
| Trade, Bus, Night or<br>Corres. |  |                |        |                 |
|                                 |  |                |        |                 |
| Other                           |  |                |        |                 |
|                                 |  |                |        |                 |

**Prior Work History**

| Dates<br>(Start/Finish) | Name of Employer | Address & Telephone | Supervisor's<br>Name & Title | Reason For<br>Leaving | Final<br>Salary |
|-------------------------|------------------|---------------------|------------------------------|-----------------------|-----------------|
|                         |                  |                     |                              |                       |                 |
|                         |                  |                     |                              |                       |                 |
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**Description of Duties and Responsibilities**

Describe in detail the work you performed (use additional sheets of paper if necessary). Include the positions you held and the job duties and responsibilities.

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Are you currently employed? Yes \_\_\_\_ No \_\_\_\_

May we contact your Present Employer? Yes \_\_\_\_ No \_\_\_\_

May we contact your Previous Employers? Yes \_\_\_\_ No \_\_\_\_

If not, please identify any exceptions and reasons for not contacting.

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In order to permit a check of your work and education records, should we be made aware of any change of name or assumed name that you previously used? Yes \_\_\_\_ No \_\_\_\_

If “yes”, identify name(s) and relevant dates.

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Have you ever been dismissed or forced to resign from any employment? Yes \_\_\_\_ No \_\_\_\_

If “yes”, please explain

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**Personal References (excluding relatives)**

Name and Address

Dates Known

Telephone

| Name and Address | Dates Known | Telephone |
|------------------|-------------|-----------|
|                  |             |           |
|                  |             |           |

**Please read carefully and sign the statement below**

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete. I also agree that any falsified information or significant omission may disqualify me from further consideration for employment and may be considered justification for termination if discovered at a later date.

I authorize a thorough investigation of my past employment and activities, agree to cooperate in such investigation, and release from all liability or responsibility all persons and corporations requesting or supplying such information.

If hired, I agree to conform to the rules, regulations, and policies of Appian and acknowledge that these rules, regulations, and policies may be changed, interpreted, withdrawn, or added to by Appian at any time without prior notice to me.

At any time after a conditional offer of employment or during employment, if hired, I authorize any physician or health care provider to release information advising Appian: (1) whether I am currently able to perform the specific job for which I am being considered or employed with or without reasonable accommodation and the basis for such conclusions; and (2) whether I can perform the job without posing a direct threat to the safety of myself or others.

I understand that my employment is terminable-at-will and that I am not being employed for any specific time, and that this application is not and is not intended to be a contract for continued employment, and that an offer of employment, if made, may be withdrawn at any time.

I further acknowledge and understand that any offer of employment, if made to me, or employment of me, may be terminated, with or without cause, and with or without prior notice, at any time, at the option of either Appian or myself. I understand that no representative of Appian has any authority to enter into any agreement for any specified period of time or to assure any other personnel action, either prior to commencement of my employment or after I have become employed, or to assure any benefits or terms and conditions of employment or make any agreement contrary to the foregoing, except as set forth in writing by the President.

I understand and agree that any controversy or claim arising out of or relating to this application form, inquiries delineated in it, or out of the employment relationship (if the company hires me) shall be settled exclusively by arbitration in accordance with the National Rules for the Resolution of Employment Disputes of the American Arbitration Association (“AAA”) and judgment upon the award rendered by the arbitrator may be entered in any court having jurisdiction thereof. Any arbitration held under this paragraph shall be conducted by a single, neutral arbitrator and the arbitration shall be held in Vienna, Virginia. The taking of depositions, except to perpetuate the testimony of unavailable witnesses, shall not be permitted in the arbitration proceedings. The parties shall each pay one-half of the AAA’s administrative fees for the arbitration and of the neutral arbitrator’s fees unless applicable law requires otherwise, not to include any costs for the transcripts of the hearing, of depositions to perpetuate the testimony of unavailable witnesses, or any attorney’s fees. The arbitrator shall issue a written award listing the issues submitted by the parties, together with a succinct explanation of the manner in which the arbitrator resolved or decided the issues.

**Signature of Applicant**

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**Date**

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