



**Long Wave Inc.**  
**Application for Employment**

We are an equal opportunity employer and do not unlawfully discriminate in employment. No question on this application is used for the purpose of limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Equal access to employment, services, and programs is available to all persons. Those applications requiring reasonable accommodation to the application and/or interview process should notify a representative of the organization.

**Employment Desired**

Position Title (application must be for a specific job vacancy) :	Date Available:	Wage Desired:	Type of Employment Desired: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Seasonal <input type="checkbox"/> Other
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Are you currently Employed:  Yes       No      If yes, may we contact your present employer?  Yes       No      If no, Why?

Have you ever applied for, or been employed by Long Wave Inc.?  
 Yes       No      If yes, when?      What position?

**Personal Information**

Last Name:	First Name:	M.I.
Address (Number, Street, City, State, ZIP)		
Hm. Phone:	Cell Phone:	Referred By:

**Name all relatives employed by Long Wave Inc. and their relationship to you:**


**Education**

High School Attended and Locations	Number of years completed?	Did you Graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
Vocational, Trade, Business or Correspondence School (mailing address and complete phone number)	Course(s) of Study?	Did you graduate or earn a certificate? <input type="checkbox"/> Yes <input type="checkbox"/> No
College Attended and Location (mailing address and complete phone number)	Course(s) of Study?	Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, Number of credit hours completed?

**General Information**

Special courses, training and/or skills related to the position for which you are applying:


**Have you even been convicted of a Crime? \***  Yes       No      If yes, describe the crime and name the jurisdiction (location) and disposition (results) of the conviction:

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**Administrative, office, computer applications, and related skills:** List software packages with release version, and specific systems experience.


\* A conviction includes a plea of guilty and/or nolo contendere' (no contest). This information does not necessarily prohibit employment with the Company. This information is only for job-related and uses only to the extent permitted by applicable state and federal law.

**Employment History** (List present or most recent position first, including any military employment)

<b>Employer:</b>		<b>Address:</b>		<b>Contact Info:</b>	
Dates Employed:		Position Title:		Starting Wage:	
From:	To:			Ending Wage:	
Main responsibilities and accomplishments:					
Your name during employment:			Supervisor Name:		
Reason for Leaving:					
<b>Employer:</b>		<b>Address:</b>		<b>Contact Info:</b>	
Dates Employed:		Position Title:		Starting Wage:	
From:	To:			Ending Wage:	
Main responsibilities and accomplishments:					
Your name during employment:			Supervisor Name:		
Reason for Leaving:					
<b>Employer:</b>		<b>Address:</b>		<b>Contact Info:</b>	
Dates Employed:		Position Title:		Starting Wage:	
From:	To:			Ending Wage:	
Main responsibilities and accomplishments:					
Your name during employment:			Supervisor Name:		
Reason for Leaving:					

I certify that my answers to the above application questions are true and accurate without consequential omission of any kind. I understand that if I am employed, and false, misleading, or otherwise incorrect statement made on the application form or during my interview may be grounds for immediate termination.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## APPLICANT VOLUNTARY SELF-DISCLOSURE

Long Wave Inc. is an Equal Opportunity Employer. Applicants are considered for all positions, and employees are treated during employment without regard to race, color, religion, sex, national origin, age, marital or veteran status, medical condition or handicap. As an Employer/government contractor, we comply with Federal regulations and affirmative action responsibilities. Solely to help us comply with government record keeping, reporting and other legal requirements, we ask that you please provide the data requested on this form. We appreciate your cooperation.

Refusal to provide this information will not subject you to adverse treatment, however, if you choose not to "self-identify", under Federal regulations, we are required to maintain race, sex, and disability information on the basis of visual observation or personal knowledge. This data is for periodic government reporting and will be detached and kept in a confidential file separate from the Application for Employment.

### Section 1: General Applicant Information

<b>Name:</b>	
<b>Date:</b>	
<b>Position applied for:</b>	

### Section 2: Please mark (X) all that apply

Race or Ethnic Identity	Gender
Hispanic ( <i>If yes, please select one of the following:</i> )	Male <input type="checkbox"/>
Hispanic (White race only) <input type="checkbox"/>	Female <input type="checkbox"/>
Hispanic (All other races) <input type="checkbox"/>	
American Indian or Alaskan <input type="checkbox"/>	
Asian <input type="checkbox"/>	
Native Hawaiian or Pacific Islander <input type="checkbox"/>	
Black or African American <input type="checkbox"/>	
White <input type="checkbox"/>	
Unknown or Missing <input type="checkbox"/>	

**I do not wish to Self-Identify**