



# Employment Application

All Acorn Mini Storage staff are employed by Oak Management and Development Corporation. Oak Management and Development Corporation is an Equal Opportunity Employer. All persons shall have the opportunity to be considered for employment without regard to their race, color, religion, national origin, ancestry, alienage or citizenship status, age, disability or handicap, sex or gender, marital status, veteran status, sexual orientation or any other characteristic protected by applicable federal, state or local laws.

**Please Print.**

Today's Date \_\_\_\_\_

## GENERAL INFORMATION

Name \_\_\_\_\_  
Last First Middle

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

Home Telephone Number (\_\_\_\_) \_\_\_\_\_ Cell Phone Number (\_\_\_\_) \_\_\_\_\_

Are you 18 years or older?  Yes  No

If hired, can you provide verification of your legal right to work in the United States?  Yes  No

*Proof of eligibility documentation must be provided at time of hire as required by law.*

## EMPLOYMENT DESIRED

Position Applied For \_\_\_\_\_

Do you want to work: Full-time \_\_\_\_\_ Part-time \_\_\_\_\_ Temporary \_\_\_\_\_

Specify days and hours available: \_\_\_\_\_

Date available to start work \_\_\_\_\_ Salary Expectations \_\_\_\_\_

How did you hear about the Company? *(If employee referral, please list the name of the employee)*

Have you ever worked for us before as an employee or through a temporary agency?  Yes  No  
*(Please provide your name of record at that time, job title and dates of employment)*

Have you applied for employment with this company within the last 12 months?  Yes  No

## EDUCATION

List education if it is related to the job for which you are applying.

	High School	Technical College	College	Graduate School
School Name and Location				
Years Completed (Circle)	9 10 11 12	1 2	1 2 3 4	1 2 3 4
Did You Graduate?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Diploma/Degree/Certificate				

## SPECIAL SKILLS/ADDITIONAL TRAINING

*Please describe any special job-related skills and qualifications acquired from employment, other education or volunteer experiences, etc. Do not include experiences which would indicate race, color, creed, religion, sex, sexual orientation, national origin, marital status, Vietnam-era veteran status, special disabled veteran status, status with regard to public assistance, membership or activity in a local commission, disability, age or any other characteristic protected by applicable federal, state or local laws.*

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## MISCELLANEOUS

Has your employment with any employer ever been involuntarily terminated?     Yes     No

If yes, please identify the employer, date of termination and reason for termination: \_\_\_\_\_

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## DRIVER QUALIFICATIONS

Do you have a valid driver's license?                       Yes     No

Proof of valid and adequate automobile insurance required at time of hire.

**EMPLOYMENT HISTORY**  
**(Please Start With Your Present or Most Recent Position)**

NAME OF EMPLOYER:		ADDRESS:	
TELEPHONE NUMBER:		POSITION:	
DATES EMPLOYED: FROM: TO:		NAME AND TITLE OF SUPERVISOR:	
REASON FOR LEAVING:		STARTING SALARY:	ENDING SALARY:
BRIEF DESCRIPTION OF YOUR WORK AND RESPONSIBILITIES:			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			

NAME OF EMPLOYER:		ADDRESS:	
TELEPHONE NUMBER:		POSITION:	
DATES EMPLOYED: FROM: TO:		NAME AND TITLE OF SUPERVISOR:	
REASON FOR LEAVING:		STARTING SALARY:	ENDING SALARY:
BRIEF DESCRIPTION OF YOUR WORK AND RESPONSIBILITIES:			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			

NAME OF EMPLOYER:		ADDRESS:	
TELEPHONE NUMBER:		POSITION:	
DATES EMPLOYED: FROM: TO:		NAME AND TITLE OF SUPERVISOR:	
REASON FOR LEAVING:		STARTING SALARY:	ENDING SALARY:
BRIEF DESCRIPTION OF YOUR WORK AND RESPONSIBILITIES:			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			

NAME OF EMPLOYER:		ADDRESS:	
TELEPHONE NUMBER:		POSITION:	
DATES EMPLOYED: FROM: TO:		NAME AND TITLE OF SUPERVISOR:	
REASON FOR LEAVING:		STARTING SALARY:	ENDING SALARY:
BRIEF DESCRIPTION OF YOUR WORK AND RESPONSIBILITIES:			
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No			

## REFERENCES

Please provide the names of three business references who are not related to you. If you do not have any employment-related references, please list individuals who can comment on your work skills.

Name	Phone Number	Address	Years Known and In What Capacity
1.			
2.			
3.			

## SIGNATURE

**APPLICANT:** *Please read the following carefully before signing this application.*

- I certify the information given by me is true in all respects.
- I understand that the misrepresentation or omission of facts on this application, on my resume or during any stage of the hiring process will eliminate me from further consideration or if discovered after hire may result in the termination of my employment.
- In consideration for my employment, I agree to abide by the policies and regulations of Oak Management and Development Corporation, which policies and procedures may be changed, withdrawn, added or interpreted at any time, at Oak Management and Development Corporation's sole option with or without notice.
- I understand that the information contained in this employment application or my being invited to participate in any stage of the hiring process is NOT intended to create an employment contract between Oak Management and Development Corporation and myself. If an employment relationship is established, I understand that my employment is at-will, meaning that I have the right to terminate my employment at any time, for any reason or no reason, with or without notice, and Oak Management and Development Corporation has the right to terminate my employment at any time, for any reason or no reason, with or without notice. No officer, employee or representative of Oak Management and Development Corporation is authorized to enter into any agreement to the contrary of the at-will relationship.
- I understand that an offer of employment is contingent on my providing sufficient documentation necessary to establish my identity and eligibility to work in the United States.
- I hereby authorize any of the persons, companies or organizations listed in my application to give all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application, and release all such parties from all liability that may result from furnishing such information to you. I authorize the company to request and receive such information.

**By signing below, I acknowledge that I have read, understand and agree with the above statements.**

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Signature of Applicant)

*I hereby acknowledge that this application will remain active for no more than 90 days from the date it was signed.*