



*"The Medical Gas Professionals"*

## Voight Professional Services, Inc.

### Employment Application

An equal opportunity employer, Voight Professional Services does not discriminate in hiring or terms and conditions of employment because of an individual's race, color, religion, gender, national origin, citizenship, age, disability, sexual orientation or marital status. VPS, Inc. only hires individuals authorized for employment in the United States.

Date of Application: \_\_\_/\_\_\_/\_\_\_

### Personal Information

Last Name	First Name	Middle Name	Social Security #
Address	City/State/Zip	Phone	Birthdate
Email	Are you authorized to work in the U.S.?		

### Education

College	Name	Degree/Area of Study	Years attended	Graduated?
	City/State			
Other School	Name	Degree/Area of Study	Years attended	Graduated?
	City/State			

### Employment History

List last 3 employers starting with the most recent first  
May we contact your current employer? Yes \_\_\_ No \_\_\_

Dates	Name of Company	Wages	Job Title	Reason for Leaving
Start ___/___/___ End ___/___/___	Address _____ Phone _____ Supervisor _____	Start _____ End _____		
Start ___/___/___ End ___/___/___	Address _____ Phone _____ Supervisor _____	Start _____ End _____		
Start ___/___/___ End ___/___/___	Address _____ Phone _____ Supervisor _____	Start _____ End _____		

**References**

Name	Relationship
1.	
2.	
3.	

**Special Skills/Certifications that apply to the position for which you are applying**


Have you ever been convicted of a crime? If yes, please explain in detail.

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Voight Professional Services, Inc. will randomly test employees for compliance with its drug-free workplace policy. As used in this policy, "random testing" means a method of selection of employees for testing, performed by an outside third party. The selection will result in an equal probability that any employee from a group of employees will be tested. Furthermore, Voight Professional Services, Inc. has no discretion to waive the selection of an employee selected by this random selection method.

X \_\_\_\_\_

I certify that all of the information furnished on this application and during the application process is true, complete and correct to the best of my knowledge. I understand that any misrepresentation or omission of facts called for may result in refusal to hire or, if hired, may result in my dismissal at any time regardless of when the false answer or omissions are discovered.

X \_\_\_\_\_

Please attach a copy/pic of your Drivers License and Social Security Card