



Today's Date: _____

Referred by: _____

www.appund.com

Please print clearly in ink. Appalachian Underwriters, Inc. considers all applicants for employment without regard to race, color, religion, gender, sexual orientation, national origin, age, disability, marital or veteran status, or based on any individual's status in any group or class protected by applicable federal, state, or local law. Appalachian Underwriters, Inc. also provides reasonable accommodations to qualified individuals with disabilities in accordance with the Americans with Disabilities Act and applicable state and local law. If you require an accommodation in the application process, please advise Management. This application must be completed in full before consideration for a position.

Personal Data

FULL NAME

 Last First Middle

CURRENT ADDRESS

 Street & Number

 City State Zip Code

PREVIOUS ADDRESS

 City State Zip Code

PREFERRED NAME/NICKNAME (OPTIONAL)	HOME NUMBER	CELL PHONE NUMBER (OPTIONAL)	E-MAIL ADDRESS (OPTIONAL)

Have you ever applied to Appalachian Underwriters, Inc.?

Yes No If yes, please give dates: _____

Have you ever worked for Appalachian Underwriters, Inc.?

Yes No If yes, please give dates: _____ Location: _____

Do you know anyone who works for Appalachian Underwriters, Inc., including friends and relatives:

Yes No Please list names: _____

How were you introduced to us?

- Employee Referral
 Newspaper ad
 Walk in
 Internet
 Website
 Dept. of Employment
 College/University
 Community Organization
 Other

If other, please list: _____

If hired, and you are under 18, can you furnish a work permit? Yes No 18 or over

If hired, can you provide proof of identity and authorization to work in the United States? Yes No

Employment Desired

Specific position you are applying for: _____

Date available for work*: _____

Total hours available per week*: _____

Are you willing to relocate? _____ If yes, where? _____ Will you travel? _____

	S	M	T	W	T	F	S
From							
To							

*Should your availability change during the course of your employment, it may impact your employment status based on business needs. While we may be able to accommodate your availability limitations upon hire, we do not guarantee that we will be able to support these limitations in the future. Should our business needs change, we may require an adjustment in your availability in order to maintain employment status.

Experience

Please give accurate and complete information. Start with present or most recent employer, including self-employment, part-time work, military employment, and any work performed on a volunteer basis. Account for your entire employment history, including significant gaps in your employment. **All information must be included, even if you are attaching a resume.**

Employer		Work Performed	
Address			
Telephone Number(s)			
Job Title	Supervisor		
Reason for Leaving			
Dates Employed / From To		Hourly Rate/Salary / Starting Final	

Employer		Work Performed	
Address			
Telephone Number(s)			
Job Title	Supervisor		
Reason for Leaving			
Dates Employed / From To		Hourly Rate/Salary / Starting Final	

Employer		Work Performed	
Address			
Telephone Number(s)			
Job Title	Supervisor		
Reason for Leaving			
Dates Employed / From To		Hourly Rate/Salary / Starting Final	

Employer		Work Performed	
Address			
Telephone Number(s)			
Job Title	Supervisor		
Reason for Leaving			
Dates Employed / From To		Hourly Rate/Salary / Starting Final	

Please attach an additional sheet if necessary.

Education

Circle Highest Grade Completed: Elementary 6 7 8 High School 9 10 11 12 College 13 14 15 16 17 18 19

HIGH SCHOOL _____

Name of School

City

State

DIPLoma OR GED RECEIVED: Yes No

COLLEGE: (List all, whether or not degree was obtained)

NAME	LOCATION	MAJOR FIELD OF STUDY	MINOR FIELD OF STUDY	DEGREES/CERTIFICATIONS

Do you have any objection to our contacting schools you attended to verify the above information? Yes No

Skills and Qualifications

PLEASE CHECK ALL THAT APPLY:

- | | | | | |
|---|--|--|---|--|
| <input type="checkbox"/> Bookkeeping | <input type="checkbox"/> Microsoft Excel | <input type="checkbox"/> Billing | <input type="checkbox"/> Power Point | <input type="checkbox"/> Switchboard |
| <input type="checkbox"/> Adding Machine | <input type="checkbox"/> Financial Reports | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Sales Associate | <input type="checkbox"/> Typing |
| <input type="checkbox"/> Customer Service | <input type="checkbox"/> Insurance | <input type="checkbox"/> Microsoft Outlook | <input type="checkbox"/> Statistical Typing | <input type="checkbox"/> Microsoft Word |
| <input type="checkbox"/> Data Entry | <input type="checkbox"/> General Clerical | <input type="checkbox"/> Payroll | <input type="checkbox"/> Marketing | <input type="checkbox"/> Microsoft Windows |
| <input type="checkbox"/> Other _____ | | | | |

Typing Speed: _____

List any special training, experience, qualifications or skills relevant to the position for which you are applying:

Professional References

Give name, work relationship, and telephone number of three supervisors/managers or other professional reference that are not related to you:

- 1) _____
- 2) _____
- 3) _____

Do you have any objection to our contacting any of your references? Yes No

If yes, who and why?: _____

Security

Have you ever pled guilty, no contest, or been convicted of a criminal offense in the last seven (7) years? * Yes No

*In answering this question, you are not obligated to disclose any convictions that have been sealed, annulled, expunged, dismissed, erased, impounded, cleared, vacated, or officially pardoned. **Before** answering this question, please review the specific state exceptions on the following page.

If yes, give details including date, location (city), nature of offense and disposition: _____

NOTE: A conviction record will not necessarily be a bar to employment. This information will only be used for job-related purposes consistent with applicable law. Failure to honestly answer this question will result in discontinued consideration of your application or termination of your employment.

Have you ever taken any merchandise, money, or property from an employer without permission? Yes No

If yes, give details: _____

California applicants only: Applicants need not identify convictions that have been sealed, expunged, dismissed or otherwise eradicated by statute or court order, or any information pertaining to referral to and participation in any pre-trial diversion program. Applicants may omit any conviction for Marijuana-related offenses that are more than two years old; any offense which was finally settled in juvenile court or referred to the youth authority; any misdemeanor conviction for which for which probation has been successfully completed or otherwise discharged AND the case has been judicially dismissed pursuant to Penal Code section 12034.

Georgia applicants only: You may exclude any conviction that has been discharged under the First Offender's Law.

Illinois applicants only: A conviction record will not necessarily be a bar to employment. Applicants are not obligated to disclose sealed or expunged records of conviction or arrest, or expunged juvenile records of conviction or arrest. Applicants may answer "no record" to inquiries about convictions or arrests in which the records have been sealed or expunged, or to inquiries about juvenile records of convictions or arrests in which the records have been expunged.

Signature

READ CAREFULLY BEFORE SIGNING AS THESE ITEMS REPRESENT SIGNIFICANT MATTERS IN CONNECTION WITH YOUR APPLICATION:

I certify that the statements and information furnished by me in this application are true and correct. I understand that omitted, false or misstated statements on this application are grounds for refusal to hire, or dismissal, at any time the company becomes aware of the omitted, falsified, or misstated information.

I understand that Appalachian Underwriters, Inc. is not obligated to provide me with employment and that I am not obligated to accept employment. I understand that nothing contained in this application, or conveyed during any interview that may be granted, or during my employment, if hired, is intended to create a contract for continued employment with Appalachian Underwriters, Inc., except as required by applicable federal, state, and local law. In addition, if an employment relationship is established, unless I am employed in Montana, I acknowledge that my employment and compensation can be terminated, with or without cause, and with or without notice at anytime, at the option of either the Company or myself, and that this cannot be altered except by an express written agreement signed by myself and a designated officer of the Company. I further understand and agree that no manager or other representative of the Company has the authority to make any verbal promises or commitments to me with respect to any term, condition, or privilege of my employment including compensation. I further understand that no policy, benefit, or procedure creates a contract for continued employment. I understand and agree that, if hired, I will be required to abide by all rules and regulations of and that my wages, benefits, and conditions of employment ca be changed by the Company at any time in its sole discretion.

I agree and herby authorize Appalachian Underwriters, Inc to conduct a background inquiry to verify the information on this application and any company form completed by me. I authorize all previous employers or other persons who have knowledge of me or my records, to release such information to Appalachian Underwriters, Inc or their agents. I herby release Appalachian Underwriters, Inc and any persons or companies that participate in or conduct a background inquiry regarding me from all claims or liabilities whatever that may arise by such disclosures or such investigation.

While I understand that this application will be kept on file for a period of up to one year, I further understand that this application will be considered active for a period not to exceed ninety (90) days. I understand that if I wish to be considered for employment beyond this period, I should inquire as to whether or not applications are being accepted for the position for which I am interested and, if so, submit a new application.

In connection with your application for employment and in keeping with Appalachian Underwriters, Inc.'s commitment to maintaining a safe, productive work environment at all facilities and work sites, agreement and cooperation with our Drug and Alcohol Testing Policy is required of all persons as a condition of employment by Appalachian Underwriters, Inc.

My Signature Certifies That I Have Read And Agree With The Above Statements

Date of Application _____ Signature of Applicant _____

DISCLOSURE AND ACKNOWLEDGMENT

[IMPORTANT – PLEASE READ CAREFULLY BEFORE SIGNING ACKNOWLEDGMENT]

NOTICE REGARDING BACKGROUND INVESTIGATION

Appalachian Underwriters, Inc. (“the Company”) may obtain information about you from a consumer reporting agency for employment purposes. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle record (“driving records”), verification of your education or employment history, or other background checks. The scope of this notice and authorization is all-encompassing, however, allowing the Company to obtain from any outside organization all manner of consumer reports now and throughout the course of your employment to the extent permitted by law. Thus, you may be the subject of a “consumer report”, which may include information about your character, general reputation, personal characteristics, and/or mode of living.

New York applicants only: You have the right to inspect and receive a copy of any investigative consumer report requested by the Company by contacting the consumer reporting agency identified below directly.

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of “consumer reports” by the Company at any time after receipt of this authorization and throughout my employment, including at the time of promotion, transfer, or reassignment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer or insurance company to furnish any and all background information requested by ChoicePoint Workplace Solutions, Consumer Report, P.O. Box 49429, Charlotte, NC 28277, 1-866-688-4864, another outside organization acting on behalf of the Company, and/or the Company itself. I agree that a facsimile (“fax”), electronic or photographic copy of this Authorization shall be valid as the original.

California applicants or employees only: By signing below, you also acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION PURSUANT TO CALIFORNIA LAW. Please check this box if you would like to receive a copy of an investigative consumer report or consumer credit report at no charge if one is obtained by the Company whenever you have a right to receive such a copy under California law.

Last Name _____ First _____ Middle _____

Other Names/ Alias _____

Present Address _____ Phone _____

City/State/Zip _____

Signature: _____ Date: _____

ATTENTION: The following information is to be completed after a conditional offer has been made and will be used solely for background screening purposes and will not be used in the hiring process.

Social Security # _____ Date of Birth _____

Driver’s License #** _____ State of Driver’s License _____

** This information is only required for individuals operating Company Vehicles.

Para información en español, visite www.ftc.gov/credit o escriba a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave. N.W., Washington, D. C. 20580.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to www.ftc.gov/credit or write to: **Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of the information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, as of September 2005 all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to Employers.** A consumer reporting agency may not give out information about you to your Employer, or a potential Employer, without your written consent given to the Employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.
- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll free number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 888-5-OPT-OUT (888-567-8688) or www.optoutprescreen.com.
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.ftc.gov/credit.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

Type of Business:	Contact:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (“National” or initials “NA” appear in or after bank’s name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 1-800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 1-202-452-3693
Savings associations and federally chartered savings banks (word “Federal” or initials “F.S.B.” appear in federal institution’s name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 1-800-842-6929
Federal credit unions (words “Federal Credit Union” appear in institution’s name”	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 1-703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Ste 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation Office of Financial Management Washington, DC 20250 1-202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator – GIPSA Washington, DC 20250 1-202-720-7051