

APPLICATION FOR EMPLOYMENT

VANGUARD SCIENCES™ is an equal opportunity employer and does not discriminate on the basis of race, religion, color, national origin, age, sex, gender, disability or any other characteristic protected by law.

INTRODUCTORY INFORMATION					Date ____ / ____ / ____
Name _____					
Last	First	Middle			
Phone _____		Cell Phone _____		Email _____	
Current address _____					
Number	Street	City	State	Zip	

APPLICANT QUESTIONS		
Type of work desired _____ Salary desired _____ Date Available ____ / ____ / ____		
How were you referred to VANGUARD SCIENCES? _____		
Yes No (Please check yes or no)		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	If hired, can you provide documents required to establish your eligibility to work in the U.S.?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are you 18 years of age or older?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Have you ever been convicted of, pled guilty or no contest to a crime other than a minor traffic violation?
If yes, please explain in detail on a separate piece of paper and include the date of final disposition of the case and the nature of the offense. This information will not necessarily disqualify you from employment but false or misleading information will. Factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account.		

EDUCATION				
TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (COMPLETE MAILING ADDRESS)	YEARS COMPLETED	MAJOR/DEGREE
High School or Last Grade Completed				
College or Technical School				
Other Schooling or Training				

Full Name: _____

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MILITARY EXPERIENCE

Branch of Service _____ From ____ / ____ / ____ To ____ / ____ / ____

Rank/Type of Service _____

Special Training/Experience _____

RECORD OF EMPLOYMENT *(List positions starting with most recent)*

Name of Employer _____	Supervisor	Employment Dates	Pay or Salary
Address _____		From ____ / ____ / ____	Start \$ _____
City _____ State _____ Zip _____		To ____ / ____ / ____	End \$ _____
Phone _____			

Reason for Leaving _____

Duties _____

RECORD OF EMPLOYMENT *(List positions starting with most recent)*

Name of Employer _____	Supervisor	Employment Dates	Pay or Salary
Address _____		From ____ / ____ / ____	Start \$ _____
City _____ State _____ Zip _____		To ____ / ____ / ____	End \$ _____
Phone _____			

Reason for Leaving _____

Duties _____

RECORD OF EMPLOYMENT *(List positions starting with most recent)*

Name of Employer _____	Supervisor	Employment Dates	Pay or Salary
Address _____		From ____ / ____ / ____	Start \$ _____
City _____ State _____ Zip _____		To ____ / ____ / ____	End \$ _____
Phone _____			

Reason for Leaving _____

Duties _____

Full Name: _____

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WORKED-RELATED REFERENCES: *(Please list at least 3 references. Do not include relatives.)*

Name _____ Position _____ Company _____ Address _____ Telephone _____ Years Known _____	Name _____ Position _____ Company _____ Address _____ Telephone _____ Years Known _____
Name _____ Position _____ Company _____ Address _____ Telephone _____ Years Known _____	Name _____ Position _____ Company _____ Address _____ Telephone _____ Years Known _____

STATEMENT (Please read this statement carefully before signing this application.)

I understand that employment with VANGUARD SCIENCES, the Company is at-will, meaning that I or the Company may terminate my employment at any time, or for any reason consistent with applicable state or federal law.

I authorize the Company to conduct a thorough background investigation of my work and personal history, and verify all data given on this application and during interviews. I hereby release the Company, and its representatives or agents, from any liability that might result from such an investigation. I authorize all individuals, schools, and firms named to provide any requested information and release them from all liability for providing the requested information.

I understand that the Company requires the successful completion of a drug and/or alcohol test as a condition of employment.

I understand this application will be active for a period of 90 days; after that time, if I wish to be considered for employment, I must submit a new application. I certify that all the statements in this completed application are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal to hire.

Signature of Applicant: _____ Date Signed: _____

Please submit your completed application by email to employment@vgsci.com

VANGUARD SCIENCES is an Equal Opportunity Employer

New Hire EEO-1 Data Sheet

Please complete this New Hire EEO-1 Data Sheet. It will supply us with information we need for federal reporting obligations. Please be advised that this information will be used and kept confidential, in accordance with applicable laws and regulations. This information will not be used as the basis for any adverse employment decision.

Name _____ Social Security # (last 4 digits) _____
Last First Middle

EEO-1 Self-Identification

We are subject to certain government recordkeeping and reporting requirements for the administration of civil rights laws and regulations. To comply with these laws, we invite you to voluntarily self-identify your race or ethnicity. **Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatment.** The information obtained will be kept confidential and separate from personnel files. It may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those requiring information to be summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

Please check the EEO Identification Group that **best** applies to you:

- Hispanic or Latino:** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

- OR -

- White (Not Hispanic or Latino):** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- Black or African American (Not Hispanic or Latino):** A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino):** A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- Asian (Not Hispanic or Latino):** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- American Indian or Alaska Native (Not Hispanic or Latino):** A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
- Two or More Races (Not Hispanic or Latino):** All persons who identify with more than one of the above races, excluding those who identify themselves as Hispanic or Latino.

Gender: Male Female

Signature

Date

If you should have any questions regarding this form, please contact Human Resources.

Voluntary Self-Identification of Veteran Status

If you believe you belong to any of the categories of protected veterans listed below, please check the appropriate boxes. We request this information in order to measure the effectiveness of the outreach and positive recruitment efforts we undertake pursuant to Vietnam Era Veteran's Readjustment Assistance Act of 1974, as amended by the Jobs for Veterans Act of 2002, 38 U.S.C 4212 (VEVRAA).

Date:

Name:

- I belong to the following classifications of protected veterans:
- Disabled Veteran
 - Recently Separated Veteran
 - Active Duty Wartime or Campaign Badge Veteran
 - Armed Forces Service Medal Veteran
- I am a protected veteran, but I choose to not self-identify the classification to which I belong
- I am NOT a protected veteran

Protected Veterans may have additional rights under USERRA-the Uniform Services Employment and Reemployment Rights Act. In particular, if you were absent from employment in order to perform service in the uniformed service, you may be entitled to be reemployed by your employer in the position you would have obtained with reasonable certainty if not for the absence due to service. For more information, call the U.S. Department of Labor's Veterans Employment and Training Services (VETS), toll-free 1-844-4-USA-DOL