



KAAH EXPRESS

Leader in modern remittance!

WWW.KAAHEXPRESS.COM

2429 E Franklin Ave Minneapolis, MN 55406 Tel 612-338-2116 Fax 612-338-2118

EMPLOYMENT APPLICATION

It is the policy of Kaah Express .F.S. Inc to provide equal employment opportunities to all applicants and employees without regard to any discrimination based on race, color, religion, gender, national origin, age, disability or veteran status.

2. Applicant Name: _____
Address: _____
City/State/Zip: _____
Number of years at this address: _____
Daytime phone: _____ Evening phone: _____

Social Security Number: _____

3. Who should be contacted if you are involved in an emergency?
Contact Name: _____
Relationship to you: _____
Address: _____
City/State/Zip: _____
Daytime phone: _____ Evening phone: _____

4. Job Position Applied For: _____

5. Salary Desired: \$ _____ per _____

6. Referral Source: Who referred you to our company?

7. Have you applied to our company previously? _____ Yes _____ No
If yes, when? _____

8. Are you at least 18 years old? _____ Yes _____ No

9. How will you get to work? _____

10. Driver's License Number: _____

What state issued your license? _____

11. Are you willing to work any shift, including nights and weekends? _____ Yes
_____ No

If no, please state any limitations:

12. If you are offered employment, when would you be available to begin work?

13.

Are you legally eligible for employment in the United States? _____ Yes
_____ No

14. Are you able to perform the essential functions of the job position with
or without reasonable accommodation? _____ Yes _____ No

What reasonable accommodation, if any, would you require?

15. Have you ever been convicted of any crime, including traffic violations?

_____ Yes _____ No If yes, please describe:

THE EXISTENCE OF A CRIMINAL RECORD DOES NOT CONSTITUTE AN
AUTOMATIC BAR TO EMPLOYMENT UNLESS RELEVANT TO THE TYPE OF
EMPLOYMENT.

16. Applicant Employment History: List your current or most recent employment first.

Employer Name: _____

Address: _____

City/State/Zip: _____

Job Duties: _____

Reason for Leaving: _____

Dates of Employment (Month/Year): _____

Employer Name: _____
Address: _____
City/State/Zip: _____
Job Duties: _____
Reason for Leaving: _____
Dates of Employment (Month/Year): _____

Employer Name: _____
Address: _____
City/State/Zip: _____
Job Duties: _____
Reason for Leaving: _____
Dates of Employment (Month/Year): _____

17. Applicant's Education and Training: List your education and training.

High School Name and Address

Last Grade? ____ 9 ____ 10 ____ 11 ____ 12 Diploma? ____ Yes ____
No

College Name and Address

Did you receive a degree? ____ Yes ____ No If yes, degree received:

Other Training (graduate, technical, vocational):

Awards, Honors, Special Achievements:

18. Applicant's Skills: Check those skills that you have. List any other skills that may be useful for the job you are seeking. Enter the number of years of experience, and circle the number which corresponds to your ability for each particular skill. (One represents poor ability, while five represents exceptional ability.)

Ability or Skill	Years of Experience	Rating
[] Word Processing _____	1 2 3 4 5	
[] Accounting/Bookkeeping _____	1 2 3 4 5	
[] Filing _____	1 2 3 4 5	

19. References: List any two people who would be willing to provide a reference for you.

Name: _____
Address: _____
City/State/Zip: _____
Telephone: _____
Relationship: _____

Name: _____
Address: _____
City/State/Zip: _____
Telephone: _____
Relationship: _____

20. Please provide any other information that you believe should be considered:

CERTIFICATION

I certify that the information provided on this Application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my Application, or if employment commences, immediate termination.

I authorize Kaah Express, F.S. Inc to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its Owner, the employment relationship will be entirely voluntary in nature. In other words, with appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer would have the same right. Moreover, no agent, representative, or employee of Sewark Market, except in a specific written contract of employment signed on behalf of the organization by its Owner, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

APPLICANT SIGNATURE

DATE

Background Check Authorization

The background check authorization form is permission by an individual to another, a company, employer or other entities to investigate his or her past records and incidents or accidents on record. This is a voluntary form and the person may assent to or deny the party permission to conduct the check.

BACKGROUND CHECK AUTHORIZATION FORM

(This form is to be filled by the individual whose background is to be checked)

First Name: _____ Middle Name: _____ Last Name _____

Other name(s) that may have been used in the past _____

Gender _____ Date of Birth: _____ Place of birth _____

State / province _____ Country _____

Social Security Number: _____ Nationality _____

Phone: _____ Email: _____

Address: _____ Town: _____

Zip: _____ State: _____

Do you have any criminal convictions? _____

If YES, briefly explain the nature _____

Country, state and county that the conviction occurred and Date _____

State / province _____ Country _____

I hereby give permission to _____ to run a background check on the information provided in this form.

Signature _____ Date _____

**CREDIT CHECK
DISCLOSURE/RELEASE/AUTHORIZATION FORM**

1. By this document KAAH EXPRESS FS. INC discloses to you that a consumer report may be obtained for employment purposes as part of the pre-screening [background check](#) and at any time during your employment or affiliation.

2. This shall authorize the procurement of a consumer report by a credit reporting agency or other sources as part of the pre-screening background investigation. If accepted, this authorization shall remain on file and shall serve as an ongoing authorization for the named employer or its associates or other sources to procure consumer reports at any time during my affiliation or employment period.

3. I also authorize the procurement of an investigative consumer report and understand that it may contain information about my employment and educational background, [criminal history](#), credit, workers comp claims, mode of living, character and personal reputation. I also understand you may make use of the internet including social networking sites.

I understand that I have the right to obtain additional disclosure as to the nature and scope of the investigation upon written request within a reasonable period of time and to obtain a copy of the report upon request. This authorization, in original or copy form, shall be valid for this and any future reports or updates that may be requested.

4. In connection with this request, I authorize all corporations, companies, former employers, supervisors, credit agencies, educational institutions, law enforcement/criminal justice agencies, city, state, county and federal courts, state motor vehicle bureaus and persons to release information they may have about me to the person or company with which this form has been filed if required, or their agent. I further authorize you to secure an investigative consumer report at any time, and any number of times, before, during and after my employment, if in the company's (or its designees) discretion, it has a legally permissible and legitimate business need for the information requested.

I release and hold harmless all parties involved from any and all liability for damages arising from requesting, procuring or furnishing the requested information except with respect to a violation of the Act. I authorize the employer and it's agent/credit reporting agency and all associated entities and its clients to receive any criminal history information or credit report pertaining to me in the files of any state or local criminal justice agency.

My signature below also indicates that I have received a [Summary of rights](#) in accordance with the Fair Credit Reporting Act.

Applicant's Signature _____

Print Name _____

Date _____ Other Names Used _____

Social Security Number _____ / _____ / _____ Date of Birth _____

Driver's License # _____ State _____

Current Address _____ City/Town _____

Zip Code _____ Previous address _____

City/Town _____ State _____ Zip _____

- _____ The Employment Application should be signed and dated by the Applicant on the appropriate line of the Application.
- _____ Applicant should also be signed the background check and credit check

Copies

- _____ If the Applicant is hired, a copy of their Application should be kept in their permanent personnel file. Otherwise, a copy of the Application may be retained for a predetermined number of months to be referred to when other employment opportunities become available.

Other Information

- * Laws governing employment are very specific regarding what is legal to ask on an employment application or during a job interview. It is essential to be familiar with these laws when undertaking to hire applicants for any position.

Reasons to Update

- * To incorporate a change in federal or state employment law.
- * To fill a different position.