



P.O. Box 35334
 Tucson, AZ 85740
 P. 520.797.0070
 email: David@litesyncinc.com

Application must be filled in completely or it will not be processed. If a box does not pertain to you, indicate with N/A in that space

LiteSync, Inc. is an equal opportunity employer whose policy is to select the most qualified candidates without regard to race, religion, color, sex, age, marital or military status, history of disability or national origin.

Date _____ Social Security #

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Drivers License # _____ State _____
 (only if you will be operating a company vehicle)

Last Name _____ First Name _____ Middle Initial _____

Street Address _____ City _____ State _____ Zip _____

Home Phone # _____ Work Phone # _____

Have you ever worked or attended school under another name? () yes () no

If yes, state dates and name: _____

Position applying for: 1. _____ 2. _____ Salary desired _____

How did you contact Light Composers, Inc.?

() Newspaper () Employee Referral () Employment Agency () Other

Please specify: _____

Are you a citizen of the USA. or lawfully admitted resident alien? () yes () no If yes, Alien Reg. # _____

Have you ever been convicted of a crime or offense other than for minor traffic violations? () yes () no

If "Yes," explain _____

Conviction of a crime is not an automatic disqualification for employment. All factors will be considered.

Have you ever served in the Armed Forces? () yes () no Military occupation _____

Date of duty, from _____ to _____ Branch _____ Serial # _____
 Month Day Year Month Day Year

EDUCATION	NAME & ADDRESS	No. YEARS ATTENDED	COURSE, MAJOR or DEGREE
High School			
College			
Post Graduate			
Business or Trade			
Other			

PRIOR WORK HISTORY (list in order, present employer first)

DATES		Name & Address of Employer	Rate of Pay		Supervisor's Name & Title	Phone No.
From	To		Start	Finish		

Briefly describe what you did; include job title:

Reason for leaving

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Other experience(s) skills you would like to mention: _____

At least (2) two Personal References:

Name: _____ Phone #: _____

Address: _____ Years Known: _____

Name: _____ Phone #: _____

Address: _____ Years Known: _____

In case of emergency notify: _____

Phone numbers: _____

Address: _____

Relationship: _____

Print Name _____ S.S. # _____

I AGREE AND UNDERSTAND THAT ALL THE STATEMENTS AND INFORMATION ON MY APPLICATION ARE CORRECT AND NO ATTEMPT HAS BEEN MADE TO CONCEAL OR WITHHOLD PERTINENT INFORMATION. I AGREE THAT ANY OMISSION, FALSIFICATION, OR MISREPRESENTATION IS CAUSE FOR IMMEDIATE TERMINATION AT ANY TIME DURING MY EMPLOYMENT.

I HEREBY AUTHORIZE INVESTIGATION OF ALL STATEMENTS AT THIS TIME WITH NO LIABILITY ARISING THEREFROM _____.

I WILL ABIDE BY ALL RULES, REGULATIONS AND POLICIES OF **LiteSync, Inc.**

I UNDERSTAND THAT A 90 WORKING PROBATIONARY PERIOD WILL BE IN EFFECT IN THE EVENT EMPLOYMENT IS OFFERED.

DATE _____ SIGNATURE _____

