HOMME, INC. OF WISCONSIN APPLICANT DATA RECORD

Signature: _____ Date: _____



Name:	Po	osition Applied for:
• •		nployees are treated during their employment without cional origin, age, marital status, sexual orientation, military
status, any non-job-rela	ted handicap or medical c	ondition, or any other legally protected status.
help comply with govern form. This data will be p	nmental record-keeping re physically separated from to ble employment. This inforr	e the removal of any possible past discrimination and to quirements, we would appreciate your completing this he remainder of your job application before the application mation will be kept in a confidential file, separate from your
Check One:	White	
	Black / African American	
	Hispanic	
	Asian/Pacific Islander	
	American Indian/Alaskan N	ative
How were you Referred to our Company?		Saw Newspaper Advertisement
		A Private Employment Agency
		A Relative or Friend Employed by this Company
		Other: Explain
Check any that Apply:	Vietnam Era Vetera	an
	Disabled Veteran	
	Handicapped Pers	on
AUTHORIZATION FOR	PRE-EMPLOYMENT SCRE	ENING
your suitability for the p Background Information Inc. of WI to proceed w	osition for which you have n Disclosure HFS-64; and o	lowing information will be gathered to help determine applied: Reference Checks from at least two (2) sources; current licensure if applicable. I hereby authorize Homme, reening to obtain the information as noted above. I release by arising therefrom.