

EMPLOYMENT APPLICATION

American Institute of Consumer Studies (AICS) is an equal opportunity employer. All persons shall have the opportunity to be considered for employment without regard to their race, color, creed, religion, national origin, ancestry, citizenship status, age, sex or gender including pregnancy, childbirth and related medical conditions), gender identity or expression (including transgender status), sexual orientation, marital status, military and veteran status, physical or mental disability, protected medical condition as defined by applicable state or local law, genetic information or any other characteristic protected by applicable federal, state or local laws and ordinances.

We will endeavor to make a reasonable accommodation to the known physical or mental limitations of a qualified applicant with a disability unless the accommodation would impose an undue hardship on the operation of our business. If you believe you require such assistance to complete this form or to participate in an interview, please contact the Recruiting department at 1-800-298-9837.

Michigan Applicants: Persons with disabilities needing accommodations for employment must notify AICS in writing of the need for an accommodation within 182 days after the date the person with a disability knew or reasonably should have known that an accommodation was needed.

Rhode Island Applicants: AICS is subject to Chapters 29-38 of Title 28 of the General Laws of Rhode Island, and is therefore covered by the state's workers' compensation law.

DIRECTIONS:

- Type or print, using blue or black ink (please write legibly)
- If you need additional space, attach a supplemental sheet
- Sign the completed application

Please answer each of the following questions completely. If the question is not applicable to you, please indicate that by writing "N/A". This application must be dated and signed in all places where indicated and as applicable. This application may not be considered if every question is not answered and if it does not contain the required signature.

GENERAL			
Name (First)	(Last)	Primary phone ()	
		Alternate phone ()	
		email address _____	
Current Street Address		City	State
		Zip Code	
Name of position applying for: FIELD INTERVIEWER		Are you available to:	
How did you become aware of this opening?		Travel for 10-14 consecutive days away from home overnight at least one time per month?	
Referred by _____		Yes No	
Website _____		Work a flexible schedule consisting of days, nights, and weekends?	
Internet search _____		Yes No	
Other _____		Date available: _____	
Desired rate/salary: _____		Have you worked for AICS or LHK Partners, Inc. previously?	
Do you have any experience as a Field Interviewer?		Yes No	
Yes No		If yes, when? _____	
If so, how much? _____			

<p>Are you legally authorized to work in the United States?</p> <p>Yes No</p> <p><i>Pursuant to the immigration reform and control act of 1986, all applicants who are offered employment must produce documents establishing their identity and authorization for employment in the United States. These documents must be produced no later than three (3) business days after employment commences. In addition, all new hires will be required to verify their employment authorization under oath by signing INS form I-9 upon commencing employment.</i></p>	<p>The Field Interviewer position involves driving. Do you currently hold a valid automobile driver's license without restrictions that may impact your ability to perform the position for which you are applying, with or without an accommodation?</p> <p>Yes No</p> <p>If you are under 18 years of age, do you have a work permit if required by applicable state law?</p> <p>Yes/not applicable No</p>
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EDUCATION RECORD:
A minimum of a high school diploma or GED is required for the Field Interviewer position.

Name & Location	Course of Study	Degree or Diploma
High School/GED		
College		
Graduate school		
Other schooling (vocational, post-graduate)		

EMPLOYMENT RECORD:
List all prior employers starting with your most recent employer; Ensure you account for the last 5 years. Do include as part of your employment history any verified work performed on a volunteer basis and / or work performed while in the military.

Start date	End date	Position held	
Employer		Last Supervisor's name	Reason for leaving
Street address, City, State, Zip Code			Phone ()
Position description		May we contact this employer? Yes No	If no, why?

Start date	End date	Position held	
Employer		Last Supervisor's name	Reason for leaving
Street address, City, State, Zip Code			Phone ()

Position description	May we contact this employer?	If no, why?
	Yes No	

Start date	End date	Position held	
Employer		Last Supervisor's name	Reason for leaving
Street address, City, State, Zip Code			Phone ()
Position description	May we contact this employer?	If no, why?	
	Yes No		

Please indicate any job-related skills and qualifications you possess which would help you perform the duties of the position you are seeking.

PROFESSIONAL REFERENCES:			
List only people who have knowledge of your capability to perform the duties of the position for which you are applying. Please do not include relatives or supervisors otherwise listed above.			
Name	Title / relationship / company	Phone ()	email address
Name	Title / relationship / company	Phone ()	email address
Name	Title / relationship / company	Phone ()	email address

FOR MA AND MD RESIDENTS:

Massachusetts Applicants: Note that it is unlawful in Massachusetts to require or administer a lie detector test as a condition of employment or continued employment. An employer who violates this law shall be subject to criminal penalties and civil liability.

Maryland Applicants: UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100.

Applicant's Signature

Date

APPLICANT'S STATEMENT

I have read and fully understand the questions asked in this application. I certify that all of the answers I have given are true, accurate and complete. I understand that the omission and/or misrepresentation of any fact from or on this application or during any interview will result in immediate rejection of my application or if I am hired will be cause for immediate dismissal. Unless I noted otherwise, I authorize AICS to contact all my employment, professional, and personal references, as well as the education institutions I have attended. I further authorize AICS to inquire about, investigate and obtain copies of any records which relate to me from my former employers and educational institutions. I hereby release AICS and all affiliated persons and entities, as well as any person or institution that provides AICS with any lawful information about me, from any and all liability whatsoever resulting from any such lawful inquiry, investigation or communication.

If hired, I understand that I will be required to abide by all of the rules and regulations of AICS. I understand and agree that nothing in this application shall constitute an offer, a contract or a guarantee of employment for a specific period of time. **If hired, I understand that my employment may be terminated with or without cause and with or without notice at any time, at the will of AICS or me. I further understand that no representative or agent of AICS, other than an Officer of AICS has the authority to enter into any agreement for employment, on an individual or collective basis, for any specific period of time, or to make an agreement contrary to the foregoing. I also understand that any agreement modifying at-will employment status, on an individual or collective basis, must be in writing and signed by an Officer of AICS.** In addition, I understand that AICS and all plan administrators shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance or otherwise change all policies, procedures, benefits or other terms and conditions of employment.

I understand that any hiring decision is contingent upon my successful completion of all of AICS's lawful pre-employment checks. I agree to execute any consent forms necessary for AICS to conduct its lawful pre-employment checks.

California Applicants Only: I understand AICS may obtain, without using the services of a third party investigative consumer reporting agency, public records pertaining to my character, general reputation, personal characteristics or mode of living during its evaluation of my application for employment and, if employed, during my employment. By checking the following box, I waive my right to receive copies of public records obtained by AICS.

Applicant's Signature

Date