



A Abby Group, Inc. - Application For Employment

A Abby Group, Inc. prides itself on being an Equal Opportunity Employer. We will not discriminate in employment because of sex, race, physical disability, religion, ethnicity, mental disability, marital status, ancestry, or place of origin.

- All information obtained within this application will be held in strict confidence, subject to applicable law.
- Please complete all applicable sections and sign the last page
- Please print clearly

Last Name: _____ First Name: _____ Middle Initial: ____ Date: ____/____/____

Home Address: _____ City: _____ State: _____ Zip Code: _____

Telephone Number(s): _____ - _____ - _____ Email Address: _____

Position(s) Applied For: _____

Date you are available for employment ____/____/____ Wage or salary desired \$ _____

Have you worked for A Abby Group, Inc. before? Yes | No If yes, when and where? _____

Have you ever been convicted of a felony? Yes | No Have you served in the Military? Yes | No

Are you legally entitled to work in the USA? Yes | No Are you active in the Military Reserves? Yes | No

If you are applying for a position that requires driving, please complete this section:

Do you have a valid driver's license? Yes | No License Number : _____

Note: If you are selected for an interview, you are required to present a copy of your driving record that is not more than 4 weeks old. After being hired, a copy of this driving record will be placed into your personnel file and an annual update will be required.

Educational Background: A Abby Group, Inc. has a company policy stating a minimum educational level of Grade 12 or equivalent for all positions:

Education completed: _____ Name of institute: _____

What machines or equipment have you operated which relate to the position you have applied for? _____

Are there any skills, experience, or other qualifications which you feel would assist you in performing the duties of the position you have applied for? _____



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Previous Places of Employment: List below your last three employers, starting with the most recent.

Employers Name: _____ Start Date: ____/____/____ Departure Date: ____/____/____

Reason for Departure: _____

Supervisor's Name: _____ Telephone #: ____ - ____ - ____ Position(s) Held: _____

Duties: _____ Hourly Wage: _____

May we contact this employer? Yes | No If 'No', state brief reason: _____

Employers Name: _____ Start Date: ____/____/____ Departure Date: ____/____/____

Reason for Departure: _____

Supervisor's Name: _____ Telephone #: ____ - ____ - ____ Position(s) Held: _____

Duties: _____ Hourly Wage: _____

May we contact this employer? Yes | No If 'No', state brief reason: _____

Employers Name: _____ Start Date: ____/____/____ Departure Date: ____/____/____

Reason for Departure: _____

Supervisor's Name: _____ Telephone #: ____ - ____ - ____ Position(s) Held: _____

Duties: _____ Hourly Wage: _____

May we contact this employer? Yes | No If 'No', state brief reason: _____

False information given or implied on an application is grounds for immediate dismissal without further notice.

I hereby state that all information provided is accurate and may be verified by you. I agree that I may be discharged if A Abby Group, Inc. at any time learns of falsification or material omission in the information provided on this application form and related documents. A Abby Group, Inc. may contact my former employer in connection with the consideration of my employment with them. All references are hereby authorized to release all information which they may have relevant to my employment with them. I hereby release A Abby Group, Inc., its affiliates, successors, and assigns, and all references from my liability that might be claimed because of information provided by such references.

I agree that I will follow all Company policies, rules, procedures, and all other directions pertaining to my employment. I understand that A Abby Group, Inc. reserves the right to add, change, and/or delete any policies, procedures, work rules, and/or benefits at any times.

Applicant Signature: _____ Date: ____/____/____

No consideration of employment will be given to any applicant who does not sign the above statement.

Note: Additional personal information will be required to complete benefit forms after being hired.

Please email a completed copy to Office@AAbbyGroup.com, or fax to 678-364-6647.

You can also come by our location at: 154 Rockwood Road. Tyrone, GA 30290

Thank you for showing an interest in pursuing a career with A Abby Group, Inc.