



Have you ever been terminated "for cause" (e.g., violation of company policy), terminated during a probationary period, asked to resign or formally disciplined by any current or former employer?

\_\_\_\_ Yes or \_\_\_\_ No. If yes, please describe: \_\_\_\_\_.

Are you subject to or have you signed a restrictive covenant, a non-competition agreement, a non-solicitation agreement, or a confidentiality statement with any current or former employer that is still in effect?

\_\_\_\_ Yes or \_\_\_\_ No. If yes, please describe: \_\_\_\_\_.

Have you ever known or do you currently know someone (family or friend) employed with Halifax? \_\_\_\_ Yes or \_\_\_\_ No. If yes, provide name and relationship to employee \_\_\_\_\_

Have you ever served in the Armed Forces of the United States? \_\_\_\_ Yes or \_\_\_\_ No. If yes, provide information below.

<input type="checkbox"/> Army <input type="checkbox"/> Navy <input type="checkbox"/> Air Force <input type="checkbox"/> Marines <input type="checkbox"/> Coast Guard	<b>Type of Work</b>	<b>Special Training</b>
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**Professional References: List three Business/Work references who are NOT related to you and are NOT previous supervisors listed above.**

1. \_\_\_\_\_

Name	Relationship	Years acquainted
Address		Phone

2. \_\_\_\_\_

Name	Relationship	Years acquainted
Address		Phone

3. \_\_\_\_\_

Name	Relationship	Years acquainted
Address		Phone

### **APPLICANT STATEMENT**

I certify that the answers given herein are true and complete to the best of my knowledge. I realize that any misrepresentation in the information submitted or any withholding of relevant information called for in this form may result in my immediate dismissal.

I authorize Halifax Media, LLC to investigate my background, references, employment records and other matters related to my suitability for employment. I authorize all persons, schools, and my current (if applicable) and previous employers contacted by Halifax Media, LLC to provide any relevant information regarding my current and/or previous employment and schooling, and I release all persons, schools, and employers of any and all claims for providing such information.

I understand and hereby acknowledge that any employment relationship with Halifax Media, LLC is "at will," which means that if I am hired, my employment with Halifax Media, LLC is not for a fixed period of time, that I may resign at any time and that Halifax Media, LLC may terminate my employment and compensation at any time, with or without cause. I further agree that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of Halifax Media, LLC.

**By signing this application, I acknowledge that I have read the above prior to signing this application and I agree to all provisions outlined.**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_