

Applicant Hiring Information

Please take note of the following:

- All employees/applicants must be at least 18 years old.
- Suncom is proud to be a drug free workplace. All employees will be subject to random drug testing during their employment.
- Applicants will be asked, if considered for a position, to obtain the required document(s) for employment:
 - Pennsylvania State Police Criminal History Record Check (\$22.00)
 - Federal Bureau Investigation (FBI) Criminal History Record Check This is required also, if you have not been a resident of the Commonwealth of Pennsylvania for two years (without interruption) immediately preceding the date of application for employment or currently live out of state. (\$25.75)
 - > The costs of these clearances are paid by the applicant.
- Suncom will screen applicants to ensure they are not excluded from participation in Federal Health Care Programs.
- If the position you are applying for requires driving, a valid PA Driver's license and clean driving record for the past 3 years is required as well as a driving record check.
- Conviction of certain offenses will affect your ability to be hired and/or remain employed due to regulations.
- Please provide the names of at least 3 employment references and 1 personal reference that are not related to you.
- Some positions require a pre-employment physical.
- Suncom is an Equal Opportunity Employer.

All information on the application must be complete, accurate and will be verified.

Thank you for your interest in becoming an employee of Suncom.

SUNCOM INDUSTRIES, INC. Employment Application



APPLICANT INFORMATION							
Last Name				M.I.	Date		
Street Address			Apartment/Unit #				
City				ZIP			
Phone			E-mail Address				
Date Available			Desired Salary				
Position Applied for							
Do you have legal right to work in the US?	YES 🗌 N	10 🗆					
Have you ever worked for this company? YES \(\square\) N		10 🗆	If so, when?				
Have you ever been convicted of a felony?	YES 🗌 N	10 🗆	If yes, explain				
Have you ever been or are you currently excluded from participation in Federal Health Care programs?	YES 🗌 N	10 🗆	If yes, explain				

REFERENCES					
Please list three professional and one personal references.	Please list three professional and one personal references.				
Full Name	Relationship				
Email Address					
Company	Phone ()				
Address					
Full Name	Relationship				
Email Address					
Company	Phone ()				
Address					
Full Name	Relationship				
Email Address					
Company	Phone ()				
Address					
Full Name	Relationship				
Email Address					
Company	Phone ()				
Address					

EDUCATION								
High School Address								
		Years Completed	9, 10,	11, 1	.2	Diploma	or C	GED
College			Address					
From	То	Did you graduate?	YES	NO [Degree		
Other			Address					
From	То	Did you graduate?	YES	NO [Degree		
PREVIOUS EMI	PLOYMENT (N	OST RECENT LIS	STED FIR	ST)				
Company			Ph	Phone ()				
Address					Su	Supervisor		
Job Title			Starting S	Salary	\$			Ending Salary \$
Responsibilities								1
From	То	Reason for Leaving]					
May we contact yo	ur previous supe	rvisor for a reference	? YES		NC) 🗆		
Company					Ph	Phone ()		
Address			Supervisor					
Job Title			Starting S	Salary	\$			Ending Salary \$
Responsibilities			<u>'</u>					
From	From To Reason for Leaving							
May we contact yo	ur previous supe	rvisor for a reference	? YES		NC) 🗆		
Company					Ph	one ()	
Address			Supervisor					
Job Title			Starting S	Salary	\$			Ending Salary \$
Responsibilities								
From	То	Reason for Leaving)					
May we contact your previous supervisor for a reference? YES \(\square\) NO \(\square\)								
DISCLAIMER AND SIGNATURE								
Suncom Industries is an Equal Employment Opportunity (EEO) Employer. We do not discriminate in hiring on the basis of race, color, religion, sex, national origin, age, disability, veteran status or status in any other group protected by federal, state, or local law. I certify that the information I provided in this Application for Employment is true. False, incomplete, or misrepresented information will be sufficient cause for my application to be rejected or, if discovered after I am employed, cause for immediate terminator of my employment. I authorize Suncom Industries to make such investigations and inquiries of my personal and employment history and other related matters as may be necessary nor or at any time in the future in arriving at an employment decision. I further authorize and request that my current and all former employers, educational institutions and those people I have listed as references furnish Suncom Industries with information about my employment record, including a statement of the reason for termination of my employment, work performance abilities, and other qualities pertinent to my qualifications for employment; hereby releasing them and Suncom Industries from all liability and responsibility arising from any information provided.								
Signature								Date

OLDER ADULTS PROTECTIVE SERVICES ACT

Prohibitive Offenses Contained in Act 169 of 1996 as Amended by Act 13 May 2011 – Department of Aging

Following Offenses as Contained in PA Crime Code (18 Pa. C.S.)

Offense Code	Prohibitive Offense Description	Type/Grading of Conviction
CC2500	Criminal Homicide	Any
CC2502A	Murder I	Any
CC2502B	Murder II	Any
CC2502C	Murder III	Any
CC2503	Voluntary Manslaughter	Any
CC2504	Involuntary Manslaughter	Any
CC2505	Causing or Aiding Suicide	Any
CC2506	Drug Delivery Resulting in Death	Any
CC2702	Aggravated Assault	Any
CC2901	Kidnapping	Any
CC2902	Unlawful Restraint	Any
CC3121	Rape	Any
CC3122.1	Statutory Sexual Assault	Any
CC3123	Involuntary Deviate Sexual Intercourse	Any
CC3124.1	Sexual Assault	Any
CC3125	Aggravated Indecent Assault	Any
CC3126	Indecent Assault	Any
CC3127	Indecent Exposure	Any
CC3301	Arson and Related Offenses	Any
CC3502	Burglary	Any
CC3701	Robbery	Any
CC3901	Theft	\
CC3921	Theft By Unlawful Taking	\
CC3922	Theft By Deception	\
CC3923	Theft By Extortion	\
CC3924	Theft By Property Lost	\
CC3925	Receiving Stolen Property	Any
CC3926	Theft of Services	One (1) Felony
CC3927	Theft By Failure to Deposit	or
CC3928	Unauthorized Use of a Motor Vehicle	Two (2)
CC3929	Retail Theft	Misdemeanors
CC3929.1	Library Theft	within the 3900 Series
CC3929.2	Unlawful Possession of Retail or Library Theft Instruments	(CC3901-CC3934)

CC3931 CC3932 CC3933 CC3934	Organized Retail Theft Theft of Trade Secrets Theft of Unpublished Dramas or Musicals Theft of Leased Properties Unlawful Use of a Computer Theft from a Motor Vehicle	
CC4101	Forgery	Any
CC4114	Securing Execution of Documents by Deception	Any
CC4302	Incest	Any
CC4303	Concealing Death of a Child	Any
CC4304	Endangering Welfare of a Child	Any
CC4305	Dealing in Infant Children	Any
CC4952	Intimidation of Witnesses or Victims	Any
CC4953	Retaliation Against Witness or Victim	Any
CC5902B	Promoting Prostitution	Felony
CC5903C	Obscene or Other Sexual Materials to Minors	Any
CC5903D	Obscene or Other Sexual Materials	Any
CC6301	Corruption of Minors	Any
CC6312	Sexual Abuse of Children	Any
O 00	Contained in PA Controlled Substance, Drug,	Device & Cosmetic Act
Offenses as	(P.L. 233, No 64)-Partial Listing	
Offenses as Offense Code		Type/Grading of Conviction
		• •
Offense Code	e Prohibitive Offense Description	Conviction
Offense Code	Prohibitive Offense Description Acquisition of Controlled Substance by Fraud	Conviction Felony
CS13A12 CS13A14	Prohibitive Offense Description Acquisition of Controlled Substance by Fraud Delivery by Practitioner	Conviction Felony Felony
CS13A12 CS13A14 CS13A30 CS13A35	Acquisition of Controlled Substance by Fraud Delivery by Practitioner Possession with Intent to Deliver	Felony Felony Felony Felony
CS13A12 CS13A14 CS13A30 CS13A35 (i),(ii), (iii)	Acquisition of Controlled Substance by Fraud Delivery by Practitioner Possession with Intent to Deliver Illegal Sale of Non-Controlled Substance	Felony Felony Felony Felony
CS13A12 CS13A14 CS13A30 CS13A35 (i),(ii), (iii) CS13A36	Acquisition of Controlled Substance by Fraud Delivery by Practitioner Possession with Intent to Deliver Illegal Sale of Non-Controlled Substance Designer Drugs Any Other Felony Drug Conviction Appearing on a PA Rap Sheet	Felony Felony Felony Felony Felony Felony



Applicant Name:		
If you have worked with individuals with disa have:	ıbilities, please let us know what e	xperience you
How do you handle conflict in the workplace	?	
Applicant Cignoture:	Data	_
Applicant Signature:	Date:	