



EMPLOYMENT APPLICATION LETTER

Dear Applicant,

Thank you for your interest in the career opportunity opening at A Walsh Imaging. We are glad you are considering our company in your search for employment and we welcome your application.

Our website provides a comprehensive description of our company, products and services. We hope that it gives you a clear profile of our mission, vision and values. On the <u>careers page</u>, you will be able to view our benefits; which include company gatherings, insurance opportunities and premium days.

We will be reviewing applications for the next 90 days and selecting the most qualified individuals for an in-person interview. If you have any questions regarding the application process or our company, please do not hesitate to contact us by phone (973) 616-7100 or <u>e-mail</u>. We will be more than happy to answer your questions.

Thank you once again for your interest in A Walsh Imaging. We look forward to receiving and reviewing your application. Good luck!

Thank You,

The Executive Team A Walsh Imaging, Inc.

APPLICATION INSTRUCTIONS

If you would like to receive consideration for a position listed please submit:

Your resume or the attached completed application; Your desired position; Your salary requirement; 3 professional references; and 1 personal reference.

You can submit the above referenced materials to A Walsh Imaging by:

- Emailing careers@awalshimaging.com; or
- Faxing 973-616-7191; or
- Mailing A Walsh Imaging, 55 Cannonball Rd Pompton Lakes NJ 07442

A Walsh Imaging is committed to providing equal opportunity in all practices, which affect employees and applicants for employment. We shall ensure that decisions affecting employees and applicants are made without regard to their race, color, religion, sex, national origin, age, disability, or any other protected category. This policy is administered in accordance with federal laws (including but not limited to Title VII of the Civil Rights Act of 1964, as amended, Age Discrimination in the Employment Act of 1967, as amended, Equal Pay Act of 1963, as amended, Americans with Disabilities Act of 1990, as amended) and all other applicable state or local law prohibiting discriminatory acts.

EMPLOYMENT APPLICATION

55 Cannonball Road, Pompton Lakes, NJ 07442 Phone: 973.616.7100 Fax: 973-616-7191 www.awalshimaging.com



Applicant Information									
First name, Middle initial, Last name									
Address	Dhono (Homo)								
Address	Phone (Home)								
Town, State, ZIP	Phone (Work)	Phone (Work)							
PRELIMINARY QUESTIONS									
Can you provide documentation of your US C	itizenship or legal status to	work in the USA?	🗌 Yes	🗌 No					
Do you know any individuals who previously	ıg?	🗌 Yes	🗌 No						
Do you know any individuals who currently w		🗌 Yes	🗌 No						
Since the age of 18, have you ever been con (A "YES" answer does not automatically disqu		you are applying for.)	🗌 Yes	🗌 No					
If yes, please explain.	any you nom are posicion	you are applying long							
	INSTRUCTIONS								
Please complete all parts of the application			·						
 You may submit supplemental information, including information about places and dat 		USI provide all informat	ion on this ap	plication,					
 Begin with your current or most recent position, and go back at least ten years. Show all employers and 									
explain any gaps in employment. Include all paid and unpaid experience you think qualifies you for this position.									
 Use additional sheets, if needed to show full employment history. Please print clearly. 									
CURRENT OR MOST RECENT EMPLOYMENT									
Dates of employment (Month/Year) Title		Starting Rate: Ending Rate:							
Employer's Name Emp	ployer's Address (include town, state and zip)								
Name & Title of Immediate Supervisor:		Supervisor's Phone Num	lber						
May we contact the supervisor?									
Reason for leaving company									
Describe your job duties									



A Walsh Imaging When your image matters ™

PREVIOUS EMPLOYMENT									
Dates of employment (Month/Year)	Title / Position	Starting Rate: Ending Rate:							
Employer's Name	Employer's Address (include town, state and zip)								
Name & Title of Immediate Supervisor:		Supervisor's Phone Number							
· · · · · · · · · · · · · · · · · · ·	Yes 🗌 Later 🗌 No								
Reason for leaving company									
Describe your job duties									
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Dates of employment (Month/Year)	Title / Position	Starting Rate: Ending Rate:							
Employer's Name Employer's Address (include town, state and zip)									
Name & Title of Immediate Supervisor:		Supervisor's Phone Number							
	Yes 🗌 Later 🗌 No								
Reason for leaving company									
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Name & Title of Immediate Supervisor:	I	Supervisor's Phone Number							
	Yes 🗌 Later 🗌 No								
Reason for leaving company									
Describe your job duties									



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EDUCATION									
Did you graduate from High Se			"NO", do you have a GED?	Yes	No No				
College or University	City, State, Country Major Total			Total Credits	Degree (AA, BS, MBA,				
				Earned	etc	-			
						,			
Trade or Other		Name of course or training				Completed?			
					Yes	No			
List any licenses or certificates	ficates that are related to the position you sook								
List any licenses or certificates that are related to the position you seek.									
List any of your professional, trade, business, or civic activities that relate to the position you seek. (You do not need to list any activities that might indicate race, color, religion, gender, marital status, national origin, age, or disability.)									
		DRIVER'S LI							
If driving a car or other vehicle	e is required for	this position,	do you have a valid NJ driv	/er's license?	□Yes □] No			
If no, do you have a driver's li	cense from anot	her US state?	Yes No Which s	tate?					
License restrictions, other than eyeglasses?									
		AUTHORIZ							
PLEASE READ THE FOLLOWING STATEMENT CAREFULLY BEFORE SIGNING THIS APPLICATION.									
I certify that all information I have provided on this application, and on any supplementary material submitted with this application, is true and correct. I hereby authorize A Walsh Imaging to investigate the accuracy of this information, contacting any person or organization as needed. I release A Walsh Imaging and all persons and organizations from which it seeks information about me from all claims and liability arising out of the company's investigation, or from supplying accurate information about me.									
I acknowledge that the company may refuse to hire me if it discovers any false statement or incorrect or misleading information on this application or supplementary material. I further acknowledge that the company may dismiss me immediately if it discovers, after hiring me, that there was any false statement or incorrect or misleading information on this application or supplementary material.									
I understand that I must submit proof of US citizenship or the legal right to work in the US if I am hired. I also understand that I may be required to pass a pre-employment drug test, medical examination, and/or other tests relevant to the position I seek.									
Applicant's Signature		Тс	oday's Date						