APPLICATION FOR EMPLOYMENT

Retail Marketing Professionals, Inc. (RMP)

P.O. Box 3219
Duluth, GA 30096
Office (800) 272-5534
Fax (888) 366-5678

www.rmp-merchandising.com

Thank you for applying for employment with Retail Marketing Professionals, Inc (RMP). Like many employers, RMP requires that you complete an application in order to be eligible for employment. Please answer all questions on this application. RMP is an equal opportunity employer. RMP considers applicants for all positions without discrimination on the basis of race, color, religion, sex, national origin, age, disability, marital status or veteran status, or any other legally protected status. No question on this application is used for the purpose of limiting or excluding any applicant consideration for employment on any basis prohibited by local, state, and federal laws.

Date of Application _____ SSN _____-_____-_____

Last Name_____ Address _____Apt._____

First Name _____Initial_____ City _____

Home Phone _____ - _____ - _____ State _____Zip_____

Cell Phone _____ - _____ - _____ Email _____

Fax # _____ - _____ - _____ Driver's License #_____

(or State ID Number)

Emergency Contact _____ Issuing State _____

Emerg Phone _____ - _____ - _____ Expiration Date _____

Signature of Applicant: _____ **Date**: _____

Only U.S. citizens or other persons who have a legal right to work in the U.S. are eligible for employment. Can you, upon employment, submit documentation verifying your identity and legal right to work in the U.S.? _____Yes _____No _____Not Currently

PLEASE READ THIS APPLICATION FORM WAIVER CAREFULLY

In exchange for the consideration of my job application by Retail Marketing Professionals, Inc. (hereinafter called "RMP"), I agree that:

- Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, wither in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements and the like as they may exist from time to time, or other RMP practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of RMP or otherwise to change any respect the employment-at-will relationship between it and the the undersigned and that relationship cannot be altered except by a written instrument signed by the President/General Manager of RMP. Both the undersigned and RMP may end the employment relationship at any time, without specified notice or reason. If employed, I understand that RMP may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction of benefits.
- I hereby certify that all of the facts and information in this application are true and complete. I authorize an investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is sufficient cause for rejection of this application and dismissal at any time without any previous notice.
- If I am offered employment, I understand that such an offer may be conditional upon satisfactory results of a background investigation regarding my criminal and driving record
- I further understand that my employment with RMP shall be probationary for a period of sixty (60) days, and further that at any time during the probationary period or thereafter, my employment relationship with the Company is terminable at will for any reason by either party.

With this application please include: ☐ Copy of SS Card ☐ Copy of Drivers ☐ Filled out I-9 ☐ Filled out W-4 or W-9