

**ACCURATE REPORTING AND TRANSCRIPTION SERVICES
Independent Contractor Application**

Last Name _____ First Name _____ Initial _____

Street Address _____ City _____

Zip Code _____ Phone Number _____ Cell _____

Social Security Number: _____ Email _____

If employed as an Independent contracted reporter can you provide evidence of legal eligibility to work in the U.S.? _____

Date you can begin work? _____ Full or Part-time _____ Are you older than 18? _____ If Under 18 will, you be required to submit a birth certificate or work certificate as required by law.

Name of High School _____ City/ State _____ Graduate ___ Ged _____

College or Technical School _____ City/State _____ Graduate ___ Degree _____

Are you Presently enrolled in School? _____ If yes name address of school and expected degree date _____ Please list your typing speed _____ words per minute.

List any job- related skills or accomplishments including Legal Experience:

-Your availability to work-

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

From :

To:

Total Hours per week you are available to work? _____ Do you have any special requests or needs for a work schedule? _____

-Give Three References That are not Former Employers Who we May contact-

Name and Occupation	How Do you know them, and for how long?	Phone Number
---------------------	---	--------------

1. _____	_____	_____
----------	-------	-------

2. _____	_____	_____
----------	-------	-------

3. _____

Your Employment History

List names of employers with present or last listed first.

Name of Employer: _____ Job duties _____

Address _____ Date of Employment From: _____ To: _____

City/ State Zip code _____ Hourly Pay or Salary _____

Supervisor: _____ Phone: _____ Reason for leaving:

Name of Employer: _____ Job Duties _____

Address _____ Date of Employment From : _____ To: _____

City/State Zip Code _____ Hourly Pay or Salary _____

Supervisor: _____ Phone _____ Reason for leaving:

CAREFULLY READ EACH STATEMENT BEFORE SIGNING AT THE BOTTOM

I certify that all of the information provided in this independent contractor application are true and complete to the best of my knowledge, and I authorize of all statements contained on this application, including a criminal background. I understand that any false or incomplete information may disqualify me from further consideration and may result in my immediate discharge. I understand that I may resign anytime with or without cause and with or without advanced notice.

I authorize the investigation of any or all statement contained on this application and also authorize any person, school, current employer, past employer, and other organizations to provide information concerning my previous employment and other relevant information that may be useful in making hiring decisions. I release such persons and organizations from any legal liability in making such statements.

I have read, understand, and agree to the above statements.

Signature _____ Date: _____