



10626 SW Barbur Blvd., Portland, OR 97219  
 971-244-1502 (phone) / 971-244-9664 (fax)  
 E-MAIL: resumes@jpm-re.com

## Employment Application

The information requested in this application is intended to obtain the information JPM Real Estate Services Inc. (JPM) needs to determine whether you meet the requirements for the position for which you are applying.

### GENERAL INFORMATION

<b>Position:</b>		<b>Salary Requirements:</b>	
<b>Date of Application:</b>		<b>Date of Availability:</b>	
<b>Have you ever applied for a position with JPM Real Estate?</b>			
<input type="checkbox"/> Yes <input type="checkbox"/> No		<b>If yes, please answer the following:</b>	
<b>Position:</b>		<b>Date of Application:</b>	
<b>Have you ever worked for JPM before?</b>			
<input type="checkbox"/> Yes <input type="checkbox"/> No		<b>If yes, please answer the following:</b>	
<b>Position:</b>		<b>Date of Termination:</b>	

### PERSONAL INFORMATION

<b>Name:</b>			
<b>Address:</b>			
	(Street)	(City/State/Zip)	
<b>Phone Number:</b>		<b>Alternate Phone Number</b>	
<b>Date of Birth</b>		<b>Social Security #</b>	
<b>If you are hired, can you provide proof that you are legally entitled to work in the United States?</b>			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
<b>Have you been convicted or pled guilty or no contest to any crime, felony or misdemeanor?</b>			
<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, explain:</i>			
<b>Are you willing to undergo a criminal background and credit check?</b>			
<input type="checkbox"/> Yes <input type="checkbox"/> No <i>If no, explain:</i>			

## EDUCATION

Name of School (High School, College, Other)	Course of Study (Majors and Degrees)

## EMPLOYMENT HISTORY

*Please list all previous employers (most recent first)*

Employer's Name		Employer's Address			Employer's Phone
Type of Firm	Title	Supervisor	Date Started	Date Left	
Reason for Leaving				Last Salary	
Responsibilities:					
Employer's Name		Employer's Address			Employer's Phone
Type of Firm	Title	Supervisor	Date Started	Date Left	
Reason for Leaving				Last Salary	
Responsibilities:					
Employer's Name		Employer's Address			Employer's Phone
Type of Firm	Title	Supervisor	Date Started	Date Left	
Reason for Leaving				Last Salary	
Responsibilities:					
Employer's Name		Employer's Address			Employer's Phone
Type of Firm	Title	Supervisor	Date Started	Date Left	
Reason for Leaving				Last Salary	
Responsibilities:					

**PROFESSIONAL LICENSES** (must attach copy if required in position applying for)

License:		State:		Date:	
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**MILITARY SERVICE DATA**

Have you ever served in the U.S. Armed Forces?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If so, please give dates of service:	From:	To:
List special skills/abilities acquired:		

**REFERENCES (REQUIRED)**

List (with address and phone numbers) the names of three persons familiar with your character, ability, or education for more than one year. Do not include friends or relatives.

1. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**This application does not constitute a written employment agreement.**

In the event that the applicant agrees to accept a position with JPM, the applicant agrees that the employment relationship between JPM and the employee is an at-will relationship and that the employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at the option of either JPM or the employee.

I certify that the information contained in this application is correct. If JPM determines that any of the information submitted in this application is false, I shall be immediately disqualified from consideration for employment and/or discharged from employment in accordance with JPM policy.

I hereby grant permission to JPM to investigate the information contained in this application and release JPM and any agents or other persons acting on behalf of JPM from any and all liability relating to any investigation of the information contained in this application.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date