



Employment Application

Please Print

Carriage Services, Inc. is an equal opportunity employer and affords equal opportunity for all positions without regard to race, color, religion, gender, national origin, age, marital status, disability, veteran status or any other status protected under local, state or federal laws.

Position Applied For: _____ Date of Application: _____

PERSONAL

Name: _____
Last First Middle

Address: _____ Apartment #: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Email Address: _____

Are you legally eligible for employment in the United States? Yes No
(If offered employment, you will be required to provide documentation to verify eligibility.)

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No
* in states where required

Have you ever worked for Carriage Services, Inc. and/or its affiliates? Yes No
* If yes, please provide dates below

EMPLOYMENT DESIRED

On what date would you be available to begin work? _____

Available to work: Full Time Part Time Temporary

What days and hours are you available for work?

Sunday Monday Tuesday Wednesday Thursday Friday Saturday
(to) (to) (to) (to) (to) (to) (to)

Are you available to work any schedule? Yes No Are you willing to work overtime? Yes No

Are you able to travel? Yes No Are you open to relocation? Yes No

What is your desired salary? _____ If yes to relocation, where? _____



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EDUCATION

	Name and Location of School	Course of Study/Major	# of Years Completed	Graduated	Degree Obtained
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Trade Vocational School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Graduate School				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Professional License(s) and/or Memberships *(Please do not disclose membership in professional organizations that may reveal information regarding race, color, religion, gender, national origin, age, marital status, disability, veteran status or any other status protected under local, state or federal laws.)*

License(s) _____ State & Number _____ Exp. Date: _____
 License(s) _____ State & Number _____ Exp. Date: _____
 License(s) _____ State & Number _____ Exp. Date: _____

Other professional memberships: _____

How did you hear about us? (Check only one)

- Walk-in
- Carriage Services' Careers Website
- Indeed Monster
- Craigslist LinkedIn
- NFDA ICCFA CANA
- Connecting Directors
- State Employment Office
- Agency/External Recruiter: _____
- Career Fairs/Job Fairs: _____
- School/University: _____
- Newspaper Ad: _____
- Employee Referral: _____
- Funeral Directors Assoc.: _____
- Other : _____



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EMPLOYMENT EXPERIENCE

Please provide accurate and complete employment history, including U.S. Military Service, beginning with your current or most recent employer. Do not exclude any employment. Provide Resume of applicable.

May we contact your present employer? Yes No

Employer	Dates Employed		Hourly Rate/ Salary	
	From	To	Starting	Final
Address				
Telephone number (s)	Summary of Work Duties and Responsibilities:			
Job Title				
Supervisor's Name	Reason for leaving			
Employer	Dates Employed		Hourly Rate/ Salary	
Address	From	To	Starting	Final
Telephone number (s)	Summary of Work Duties and Responsibilities:			
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Supervisor's Name	Reason for leaving			
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Job Title				
Supervisor's Name	Reason for leaving			



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Please read the following carefully before agreeing since it contains terms and conditions that affect your application and potential employment, or, if you have already been hired, your continued employment. I understand this disclosure statement represents Carriage Services, Inc. and its' subsidiaries and other majority owned affiliates, hereafter referenced as the "Company". In exchange for the Company's consideration of this application and my possible employment and/or my continued employment with the Company, I agree to the following terms and conditions:

Authorization and Release - I authorize the Company to conduct an investigation of my qualifications for employment including verification of my educational and employment history. I realize that the investigation may include contacting prior employers, professional and/or personal references and educational institutions I have attended unless I have expressly indicated otherwise on this form. I release any and all persons and parties connected with the investigation from any and all claims or damages arising from the furnishing of information as part of that investigation. I understand that any employment I might obtain with the Company is at-will. I further acknowledge that the Company shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance or otherwise change all policies, procedures, benefits or other terms or conditions of employment. No representative or agent of the Company has the authority to enter into any agreement for employment for any specified period of time, or to make any changes in any policy, procedure, benefit or other term or condition of employment. I also understand that only the VP, Human Resources has the authority to change my at-will status, and then only if in writing, signed by both parties and specific to the individual; and that at any time for any reason, I may resign my position or the Company may terminate my employment. Unless restricted by law, I understand that in conjunction with my application for employment, the Company will conduct a criminal background check of criminal convictions and pending prosecutions in accordance with applicable federal and state laws and that information obtained as a result of this background check may, but will not necessarily, result in my not receiving an offer of employment, withdrawal of my offer of employment, or termination of employment. I have carefully read and understand this notice and authorization form and, by my acceptance below, consent to the release of investigative reports, as defined above, to the Company (1) in conjunction with my application for employment, (2) during the entire course of my employment, if any, and (3) after any such employment ends. I further understand that any and all information contained in my job application, accompanying documents, or otherwise disclosed to the Company by me before, during or after my employment, if any, may be utilized for the purpose of obtaining the consumer reports or investigative reports requested by the Company. I understand that as a condition of employment, that I will notify my immediate manager within thirty (30) calendar days after receiving notice of any criminal conviction and that the Company may, at its' discretion, take appropriate disciplinary action, up to and including termination of employment, where applicable. I understand that the Company has a Substance Abuse Policy concerning alcohol and drug use and that during the course of my employment with the Company I may be subject to drug and/or alcohol testing under certain conditions as defined by Company policy, including, but not limited to, post-accident and reasonable cause. If employed, I agree to engage in no outside activity which would involve a material conflict of interest with, or which could reflect adversely on the Company. I understand the decision of a conflict of interest rests solely with the Company. During and after any employment with the Company, I will not divulge or appropriate for my own use or for the use of others, except as the Company may authorize or direct, any knowledge or information obtained by me during my employment and considered under industry standards or by the Company to be confidential or proprietary. I understand that, should employment be offered to me that I may be required to reaffirm these statements through completion of the Company's standard employee agreement concerning confidential information applicable to the position being offered. At the end of my employment, I will return all property of the Company. I understand that if I am offered employment with the Company, I must provide documentation to establish that I am either a U.S. citizen or a foreign national lawfully authorized to work in the United States and that if I am unable to provide such documentation, my offer of employment may be revoked. I hereby verify that the answers and statements I will provide on this application (or any accompanying documents) are complete, true and correct to the best of my knowledge. I have not knowingly withheld any fact or circumstance that would, if disclosed, affect my application unfavorably and I am legitimately seeking a job with the Company. I understand that any omission of information requested or any false or misleading information that I furnish on or in connection with the application for employment, including my authorization for a criminal-record check, may result in rejection of my application and/or may be considered justification for termination of employment if discovered at a later date.

BY SIGNING BELOW, I HEREBY ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE PRECEEDING STATEMENTS.

Signature: _____

Date: _____