

EMPLOYMENT EXPERIENCE

Please list each job held, starting with your present or most recent job; including military service assignments and volunteer activities.

1. EMPLOYER _____ DATES: From _____ To: _____
 STREET: _____ CITY: _____ STATE: _____ ZIP CODE: _____
 TELEPHONE: _____ HOURLY RATE/SALARY: _____ POSITION HELD: _____
 DUTIES PERFORMED: _____
 SUPERVISOR: _____ REASON FOR LEAVING: _____

2. EMPLOYER _____ DATES: From _____ To: _____
 STREET: _____ CITY: _____ STATE: _____ ZIP CODE: _____
 TELEPHONE: _____ HOURLY RATE/SALARY: _____ POSITION HELD: _____
 DUTIES PERFORMED: _____
 SUPERVISOR: _____ REASON FOR LEAVING: _____

3. EMPLOYER _____ DATES: From _____ To: _____
 STREET: _____ CITY: _____ STATE: _____ ZIP CODE: _____
 TELEPHONE: _____ HOURLY RATE/SALARY: _____ POSITION HELD: _____
 DUTIES PERFORMED: _____
 SUPERVISOR: _____ REASON FOR LEAVING: _____

4. EMPLOYER _____ DATES: From _____ To: _____
 STREET: _____ CITY: _____ STATE: _____ ZIP CODE: _____
 TELEPHONE: _____ HOURLY RATE/SALARY: _____ POSITION HELD: _____
 DUTIES PERFORMED: _____
 SUPERVISOR: _____ REASON FOR LEAVING: _____

5. EMPLOYER _____ DATES: From _____ To: _____
 STREET: _____ CITY: _____ STATE: _____ ZIP CODE: _____
 TELEPHONE: _____ HOURLY RATE/SALARY: _____ POSITION HELD: _____
 DUTIES PERFORMED: _____
 SUPERVISOR: _____ REASON FOR LEAVING: _____

PRESENT MEMBERSHIP IN: NATIONAL GUARD/MILITARY RESERVES

Branch _____ Rank _____

REFERENCES: Please give the names of three persons not related to you, whom you have known at least one year.

	NAME/ADDRESS/PHONE NO.	NAME OF BUSINESS	YEARS ACQUAINTED
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

GENERAL:

Have you ever been convicted of a crime (other than traffic convictions)? A criminal conviction will not automatically disqualify an applicant. Nature of the crime, the date of the conviction, the job being applied for, and other factors will be considered. YES ____NO ____
If yes, please give the complete facts showing date, place, reason and disposition in "Remarks Section".

Do you currently have any relatives or friends employed with SMI. or any property under our management? YES ____NO ____
If yes, please provide name(s) in the "Remarks Section" below. SMI Anti-nepotism policy: SMI maintains an anti-nepotism policy with regard to employment of relatives within the same department, at the same "small property" which is defined as a property employing 12 persons or less, or when one relative would be in a supervisory capacity over the other relative. "Relative" is defined as: spouse, child, parent, grandparent, spouse of a parent or grandparent, sibling, spouse of a sibling, uncle, aunt, niece, nephew, cousin; and parent, grandparent, child, or sibling of your spouse.

I understand that the position for which I am applying is one of trust and, therefore, authorize full investigation of all statements contained in and relating to this application and, further agree, if necessary, to execute any documents required in the investigation of the facts contained in my application. I also authorize SMI to contact any of the references listed herein or others, and I authorize those persons to release any information requested by SMI. I understand that SMI/The Apartment Community have an illegal substance alcohol abuse policy and will perform criminal background checks.

It is also understood that the position for which I am applying is not guaranteed for any particular length of time and that either SMI/ The Apartment Community or I remain free to terminate the relationship at any time with or without cause and with or without notice. I further understand that no supervisor or other representative of SMI/The Apartment Community has the authority to alter this relationship. _____(please initial)

If employed by SMI/ The Apartment Community or any other property for which SMI acts as agent, I agree to abide by and conform to all policies and rules. I understand as an employee and representative of SMI / The Apartment Community or any property for which SMI acts as agent that I will be dealing with and coming into contact with the clients of SMI / The Apartment Community and, therefore, agree and understand that cleanliness and proper grooming are prerequisites of employment and agree to abide by SMI standards.

I acknowledge that all information provided in this application and given by me during any interviews is truthful and that falsification or omission is grounds for disqualifying my application or, if hired, grounds for termination. I understand that this application will remain effective for a period of fifteen (15) days from the date submitted. Thereafter, I must reapply if I wish to continue to be considered for employment.

Scott Management, Inc. and The Apartment Community are equal opportunity employers and provide equal employment opportunities to qualified individuals regardless of race, color, religion, sex, national origin, physical or mental disability, veteran status, and all other classes protected by applicable federal, state and local laws. Scott Management, Inc. and The Apartment Community are smoke-free work environments.

PERSONS APPLYING FOR WORK IN MARYLAND:

UNDER MARYLAND LAW, AN EMPLOYER MAY NOT REQUIRE OR DEMAND, AS A CONDITION OF EMPLOYMENT, PROSPECTIVE EMPLOYMENT, OR CONTINUED EMPLOYMENT, THAT AN INDIVIDUAL SUBMIT TO OR TAKE A LIE DETECTOR OR SIMILAR TEST. AN EMPLOYER WHO VIOLATES THIS LAW IS GUILTY OF A MISDEMEANOR AND SUBJECT TO A FINE NOT EXCEEDING \$100.

SIGNATURE

DATE

Do you have any questions about anything in this pre-employment application?

REMARKS SECTION:

**NOTICE AND AUTHORIZATION OF USE OF CONSUMER REPORTS
FOR EMPLOYMENT PURPOSES**

As a condition of employment with Scott Management, Inc., a consumer report and/or investigative consumer report may be obtained for employment purposes when evaluating your eligibility for employment, promotion, reassignment, and/or retention.

I, _____, hereby authorize First American Background to obtain a consumer report and/or investigative consumer report on myself for the purpose of evaluating my eligibility for employment, promotion, reassignment, and/or retention with Scott Management, Inc.

I understand that such reports may include information bearing upon my credit worthiness, credit standing, character, general reputation, personal characteristics, and/or mode of living. I further acknowledge that such information may be obtained through personal interviews with any person who has knowledge of such information.

I understand that I have the right to request the complete and accurate disclosure of the nature and scope of any investigative consumer report performed, and hereby acknowledge receipt of the Federal Trade Commission's Summary of Consumer Rights enclosed herein.

I authorize and request every person, firm, company, corporation, governmental agency, court, college, university, school district, or other education institution, law enforcement office, and any other entity having control of possession of any information pertaining to me or my background to furnish same to any requesting party compiling information for the purpose indicated herein.

Date: _____ **Applicant's Signature:** _____

Social Security No.: _____* **Printed Name:** _____

Date of Birth: _____* **Phone:** _____

Address: _____

*Responses to these questions are completely voluntary. You need not respond to have your application considered. However, without this information, we may be Unable to distinguish you from another in the event we discover adverse information during our background investigation.

SCOTT MANAGEMENT, INC.

Notice of Alcohol & Controlled Substance Policy

Scott Mangement, Inc. (SMI) maintains a Substance Abuse Policy wherein all newly hired employees are required to submit to a urine test at a specified independent lab at the time of orientation.

I understand that if I am offered a position and accept same, I will be expected to consent to submit to a test to determine or rule out the presence of controlled substances or alcohol in my system.

I hereby agree to have the test results reported to the SMI human resources coordinator and understand that if the results are confirmed as positive I may be immediately discharged.

I understand that the taking of certain prescribed or over the counter medications can cause positive test results and that, if I wish to have any medications I am taking, or have recently taken, considered when my test results are reviewed, I will need to be prepared to provide this information at the time of my employment orientation or after my test is completed.

Applicant Signature: _____

Date: _____

SCOTT MANAGEMENT, INC.

As part of my application for employment with Scott Management, Inc, I hereby request and authorize my present and prior employers, police agencies, educational institutions, and other record holders, excluding consumer reporting agencies, to release to Scott Mangement any files, records or other information pertaining to my prior employment, military record, criminal record, driving record, or educational attendance, disciplinary actions, character, work habits, performance, experience and reasons for termination of past employment.

I hereby fully release and discharge Scott Management, Inc. and those providing this information to Scott Management ,Inc. and their respective employees, from all claims and damages arising out of or relating to, the release of this information.

I acknowledge that a telephonic facsimile or photographic copy of this form shall be as valid as the original.

FULL NAME: _____
(Print)

FULL NAME: _____
(Signature)

CURRENT ADDRESS: _____

(City, State, Zip)

DRIVER'S LICENSE # _____

SOCIAL SECURITY #: _____

TELEPHONE#: _____

PROPERTY APPLYING TO: _____

Para informacion en espanol, visite www.ftc.gov/credit o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identify theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.
- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.ftc.gov/credit.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator - GIPSA Washington, DC 20250 202-720-7051