

HANTZ GROUP AND ITS AFFILIATED COMPANIES¹ (Company)

Application for Employment

An Equal Opportunity Employer

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, marital status, and height or weight. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

This application was designed to comply with the Federal Civil Rights Act, Title VII, The Age Discrimination Act of 1967, the Americans with Disabilities Act, the Civil Rights Act of 1991 and Michigan Fair Employment Laws. Hantz Group, therefore, gives assurance that no questions answered is, or will be used to, unlawfully discriminate in matters of race, color, gender, religious creed, national origin, marital status, age, disability, Vietnam Veteran's status, or on the basis of height or weight.

¹"It's affiliated companies" means any subsidiary of Hantz Group, Inc., including but not limited to Hantz Agency, L.L.C., PLUS Agency, L.L.C., Hantz Benefit Services, L.L.C., Hantz Consulting, L.L.C., Hantz Financial Services, Inc., Hantz Tax & Business, L.L.C., Hantz Technology, L.L.C., Hantz Software, L.L.C., Hantz Commercial Insurance Agency, L.L.C., Tranex Financial, Inc., DiLaura Brothers, L.L.C., Hantz Group Racing, L.L.C., Hantz Group Sports & Entertainment, L.L.C., Hantz Group Soccer L.L.C., Hantz Soccer USA, L.L.C., Hantz Soccer Camps, L.L.C., and Hantz Air, L.L.C., United Beverage Group, L.L.C., Hantz Farms, L.L.C., Bowling IQ, L.L.C.

Name _____ Date _____

Position Applied For _____

Home Phone (_____) _____ Alternate Phone (_____) _____

Applicants are not required to give any information prohibited by law. In order to be considered for employment all portions of this application must be completed.

Personal

Name _____
(Last) (First) (Middle)

Address _____
(Street) (City) (State) (Zip)

Are you at least 18 years old? ____ Yes ____ No

Are you legally eligible for employment in the U.S.? ____ Yes ____ No
(Authorization for Employment and Proof of Identity required upon Employment)

For Driving Jobs Only:

Do you possess a valid driver's license? ____ Yes ____ No

Have you had your driver's license suspended or revoked in the last three years? ____ Yes ____ No

If yes, give details _____

What prompted you to apply for work here?

____ Agency ____ Friend ____ Relative ____ Newspaper ____ Other

____ Employee Referral/Name _____

Name, address and phone number of persons to be notified in case of emergency:

Have you ever been convicted of any law violation (except a minor traffic violation)? ____ Yes ____ No

If yes, give details _____
(Conviction will not necessarily disqualify an applicant from employment)

Personal Interests _____

Job-related organizations, clubs, professional societies _____

(Omit those which indicate sex, race, religion, creed, color, national origin, ancestry, marital status and/or age)

Education
 "See Resume" is not sufficient.

Name and Location of School	Dates Attended From/To	Circle Highest Year Completed	Major/Minor Study Fields	Degree/diploma
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High School:

_____	(not applicable)	9 10 11 12	(not applicable)	
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Technical / Vocational:

_____	_____	1 2 3 4	_____	
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College / University:

_____	_____	1 2 3 4	_____	
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Graduate School:

_____	_____	1 2 3 4	_____	
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Other:

_____	_____	1 2 3 4	_____	
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Honors Received:

Availability for Work

(Administrative / Clerical Positions Only)

Type of Work: _____ Full-Time: _____ Part-Time _____

Will you work overtime if requested to do so? _____ Yes _____ No

Will you work extra days in the week if necessary? _____ Yes _____ No

Do you plan to work elsewhere or attend school while working here? _____ Yes _____ No

How soon after accepting an offer can you be able to start working? _____

Work Experience
(All Applicants)
"See Resume" is not sufficient.

Start with the most recent employer. Account for all periods of time including military service and any periods of unemployment.

Employer	Phone		
From: _____ To: _____			
Address: _____			
Street	City	State	Zip
Position: _____			
Responsibilities: _____			

Supervisor's Name: _____			
Starting Salary / Wages: _____		Final Salary / Wages: _____	
Reason for Leaving: _____			

Employer	Phone		
From: _____ To: _____			
Address: _____			
Street	City	State	Zip
Position: _____			
Responsibilities: _____			

Supervisor's Name: _____			
Starting Salary / Wages: _____		Final Salary / Wages: _____	
Reason for Leaving: _____			

Employer _____ Phone _____

From: _____ To: _____

Address: _____
Street City State Zip

Position: _____

Responsibilities: _____

Supervisor's Name: _____

Starting Salary / Wages: _____ Final Salary / Wages: _____

Reason for Leaving: _____

Employer _____ Phone _____

From: _____ To: _____

Address: _____
Street City State Zip

Position: _____

Responsibilities: _____

Supervisor's Name: _____

Starting Salary / Wages: _____ Final Salary / Wages: _____

Reason for Leaving: _____

Work History

Have you ever worked under any other name? ____ Yes ____ No

If yes, give names: _____

Are you presently employed? ____ Yes ____ No

If yes, may we contact your present employer: ____ Yes ____ No

Have you ever been fired from a job or asked to resign? ____ Yes ____ No

If yes, please explain: _____

Do you currently hold, or have you ever held, any securities licenses? ____ Yes ____ No

If yes, you must complete and submit a Background Disclosure Form with this Application.

Skills

References

List three (3) references who are not related to you and are not previous employers.

Name	Address	Occupation	Phone
Name	Address	Occupation	Phone
Name	Address	Occupation	Phone

Applicant's Statements

CERTIFICATION

I represent that the information in this employment application is true and complete. I understand that any falsification, misstatement or omission of information may be grounds for either the rejection of my application or my dismissal from subsequent employment.

AUTHORIZATION

I authorize the references in my application to provide you any and all information they may have. I release all parties, including the listed references and prior employers from all liability for any statements or information they may provide. Specifically, I authorize the Hantz Group to contact any and all former employers or any or all of the references I have identified for the purpose of verifying any of the information I have provided to the Hantz Group and/or for the purpose of obtaining any information whatever, whether favorable or unfavorable, about me or my employment with any former employer.

AT WILL EMPLOYMENT

In consideration of my employment, I agree to conform with all company policies and rules. I understand that these rules and policies, as well as any and all programs, procedures, and/or benefits, may change from time to time at the sole election of the Company. I understand that nothing in this application is intended to imply or create an employment relationship or contract for employment. I further understand that, if hired, my employment is "at-will", and can be terminated at any time, with or without cause and with or without the provision of advance notice. I agree that the terms of my employment outlined here constitute the complete agreement between me and the Company and that they supercede all prior oral or written terms or policies of employment. No terms, policies, changes, or other matters may be created apart from the terms outlined here except in writing signed by the Company.

ARBITRATION OF DISPUTES

To the extent required by law, I further agree that any dispute arising between me and the Company in connection with my employment shall be submitted for arbitration before the New York Stock Exchange, Inc. (NYSE), or Financial Industry Regulatory Authority (FINRA). If NYSE and FINRA are unavailable, the American Arbitration Association will be substituted. Such arbitration shall be conducted pursuant to the rules and regulations then in effect, and any award resulting there from may be entered as a judgment by any court of competent jurisdiction.

I have read, understand, and, by my signature, consent to these statements.

Signature

Date

HANTZ GROUP INC. and its Affiliated Companies¹ (Company)

AUTHORIZATION to Obtain Information

Name: _____ Alias/Nickname: _____

Business Name: _____

Business Address: _____

Business Phone: _____ Business Fax: _____

Business County: _____ Internet Address: _____

Home Address: _____

Home Phone: _____ Home County: _____

Cell Phone: _____

SSN: _____ DOB: _____

Driver's License #: _____ State: _____

Professional Licenses: _____

I authorize Hantz Group, Inc. to obtain information including, without limit, any financial, credit, personal, employment or such other information, as it deems necessary. Such information may be obtained from any source whatsoever, including, but not limited to, credit reporting bureaus, FINRA, SEC, State or other regulatory agencies, law enforcement agencies, independent agencies or previous employers.

I provide this authorization to enable Hantz Group, Inc. to determine, in its sole discretion, whether it will register me through it with FINRA as a registered representative.

I further authorize ongoing procurement of this information at any time during my employment with Hantz Group, Inc.

Signature: _____ Date: _____

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