



Dear Candidate:

Welcome and thank you for your interest in a position with Kaplan!

Please complete this entire application, including the background consent and disclosure release form and application addendum (if necessary).

Although we will ask you to submit a resume, the application asks questions typically not included in a resume, i.e., salary history, references, former supervisors, addresses and phone numbers, etc.

Please take your time filling out the application; accuracy and completion are more important than speed. If time does not permit you to complete the application and your interview, please let us know. Once you have filled out the entire application, please sign the last page.

We look forward to meeting with you shortly!

Thank you,

Kaplan Recruiting Team



# Application for Employment

Kaplan, Inc. provides equal employment opportunity to all applicants and employees regardless of race, religion, gender, color, sex, national origin, disability, marital status, sexual orientation, gender identity, veteran status, or any other legally protected status.

(Please print)

Location of Position: \_\_\_\_\_ Date: \_\_\_\_\_

Position applied for: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Present Address: \_\_\_\_\_  
Number and Street

City State Zip Code

Telephone: Home ( ) Work ( )

Cell phone: ( )

Email Address: \_\_\_\_\_

(Connecticut and Massachusetts Applicants: Please do not complete the section below. See attached state addendum.)

**For applicants from of all other states:** Have you ever been convicted of a crime that has not been expunged, sealed, pardoned, annulled, statutorily eradicated or dismissed upon condition of probation? You are not required to disclose sealed or expunged records of conviction or arrest, or expunged juvenile records of conviction or arrest. Where required by State law, we only inquire about and consider convictions substantially related to the position for which you are applying.

**California Applicants:** You should answer “No Record” with respect to any conviction for a marijuana offense if the conviction occurred more than two years prior to the date this application is completed. In addition, do not provide any information regarding a referral to and participation in any pre-trial or post-trial diversion program.

**Hawaii Applicants:** Do not respond to this inquiry until you have been given a conditional offer of employment. Answer “Yes” only if the conviction was within the last ten (10) years.

**Pennsylvania Applicants:** You should answer “No Record” with respect to any conviction for a misdemeanor or summary offense.

**Utah Applicants:** Do not answer this inquiry with respect to any non-felony conviction.

**Washington Applicants:** Answer “Yes” only if the conviction was within the last ten (10) years.

Yes  No

If you checked “Yes,” please explain below. A criminal conviction will not necessarily be a bar to employment. To help us evaluate your application, please describe the nature of the crime and your subsequent rehabilitation.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Referred by (specify):

Internet job board Which one? \_\_\_\_\_  Kaplan Employee Who? \_\_\_\_\_

Kaplan Website  Newspaper Ad  Employment Agency  Other \_\_\_\_\_

Are you immediately available to begin employment?  Yes  No If not, when? \_\_\_\_\_

Best time to contact you? \_\_\_\_\_

Have you ever been employed by Kaplan?  Yes  No

If yes, which division? \_\_\_\_\_

Department/Supervisor's name: \_\_\_\_\_

Describe your experience or skills that qualify you for the job for which you are applying: \_\_\_\_\_

\_\_\_\_\_

List all software you are familiar with: \_\_\_\_\_

Which, if any, Kaplan services or products have you used? \_\_\_\_\_

When? \_\_\_\_\_

## Record of Education

### High School

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Number of years completed: \_\_\_\_\_ Did you graduate?  Yes  No

Diploma or degree: \_\_\_\_\_ Average grade or GPA: \_\_\_\_\_

### College

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Major: \_\_\_\_\_ Number of years completed: \_\_\_\_\_ Did you graduate?  Yes  No

Diploma or degree: \_\_\_\_\_ Average grade or GPA: \_\_\_\_\_

### Other Education (Technical, Graduate, etc.)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Major: \_\_\_\_\_ Number of years completed: \_\_\_\_\_ Did you graduate?  Yes  No

Diploma or degree: \_\_\_\_\_ Average grade or GPA: \_\_\_\_\_

Honors or Awards: \_\_\_\_\_

## Record of Employment

This section must be completed regardless of whether or not a resume has been submitted.

List each job held, starting with your most recent. Account for all periods of time, including full-time employment, part-time employment, temporary employment, military service in the armed forces of the U.S., and all periods of unemployment.

Salary: Starting: \$ \_\_\_\_\_ per \_\_\_\_\_ Final: \$ \_\_\_\_\_ per \_\_\_\_\_

Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

Employer: \_\_\_\_\_ Type of business: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Hours per week: \_\_\_\_\_

Position held: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

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Salary: Starting: \$ \_\_\_\_\_ per \_\_\_\_\_ Final: \$ \_\_\_\_\_ per \_\_\_\_\_

Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

Employer: \_\_\_\_\_ Type of business: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Hours per week: \_\_\_\_\_

Position held: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

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Salary: Starting: \$ \_\_\_\_\_ per \_\_\_\_\_ Final: \$ \_\_\_\_\_ per \_\_\_\_\_

Dates: From: \_\_\_\_\_ To: \_\_\_\_\_

Employer: \_\_\_\_\_ Type of business: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Hours per week: \_\_\_\_\_

Position held: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

List four professional references (you may include people listed above):

Name: \_\_\_\_\_ Telephone(s): \_\_\_\_\_

Company Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone(s): \_\_\_\_\_

Company Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone(s): \_\_\_\_\_

Company Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone(s): \_\_\_\_\_

Company Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Years Known: \_\_\_\_\_

## Representations by Applicant

I understand that if I am employed (i) I will have to abide by the rules and policies of Kaplan, Inc., (“the Company”) and do the work given to me in a manner consistent with Company standards, (ii) my job is ‘at-will’, meaning my position is not guaranteed for a set period of time and I may be asked to leave at any time, for any reason, (iii) my hours and days of work will not be guaranteed, but will be set by the Company and may be changed as required by the Company and (iv) overtime work may be required as part of my regular job duties.

I have carefully read this application, and all of my answers on this application are true and complete. I understand that completion of this application and its review by the Company does not imply or constitute acceptance of me as an employee of the Company, which can only be accomplished by formal notification to me from a duly authorized official of the Company. I authorize the Company and its agents and representatives to investigate and verify all of the statements made in this application, and in connection with such investigation and verification, to exhibit this application and disseminate the information contained herein to any person. I authorize all persons, companies, schools or other entities listed in this application to give the Company any information regarding my employment, education of character and hereby release the Company, and all of said persons, companies, schools and other entities from all liability for any damage that may result from furnishing such information. I further agree to cooperate fully in this investigation. If I have not answered all questions on this application honestly and completely, I understand that I will be subject to immediate dismissal, regardless of when my failure to answer honestly or completely may come to the attention of the Company.

I further understand that any and all offers of employment with the Company are contingent upon my satisfactorily passing a pre-employment background investigation. In the event I do not satisfactorily pass a pre-employment background investigation, I understand that any offer of employment will be rescinded or, in the event I have commenced my employment with the Company, my employment terminated. No waiver or modification of any of the above provisions on the part of the Company shall be considered binding or effective unless in writing and signed by a corporate officer of the Company.

Signature of Applicant \_\_\_\_\_ Date Signed \_\_\_\_\_



## CONSUMER NOTIFICATION

**Prospective Kaplan, Inc. Applicant:**

Please be advised that a consumer report is being obtained from a consumer-reporting agency for the purpose of evaluating you for employment, promotion, reassignment or retention as an employee. This pre-employment background check is a condition of your employment with Kaplan, Inc.

Any and all offers of employment with Kaplan, Inc. are, among other things, contingent upon your satisfactorily passing the pre-employment background investigation referenced above. In the event you do not satisfactorily pass the pre-employment background investigation, any offer of employment will be rescinded or, in the event you have commenced your employment with the Company, your employment terminated.

This notification is for your records. Please take this document with you following your interview.

# CONSUMER AUTHORIZATION

I. I understand that an investigative report may be generated on me that may include information as to my character, general reputation, personal characteristics, or mode of living; work habits, performance or experience, along with reasons for termination of past employment/professional license or credentials; financial/credit history; or criminal/civil/driving record history. I fully give my consent to and understand that General Information Services, Inc., on behalf of Kaplan may be requesting information from public and private sources about any of the information noted earlier in this paragraph in connection with Kaplan consideration of me for employment, promotion or position re-assignment or contract now, or at any time during my tenure with customer name.

II. IF APPLICABLE, medical and worker's compensation information will only be requested in compliance with the Federal Americans with Disabilities Act (ADA) and/or any other applicable state laws. According to the **Fair Credit Reporting Act** (FCRA, Public Law 91-508, Title VI) which was **revised effective September 30, 1997**, I am entitled to know if the considerations for which I am applying are denied because of information obtained from a consumer reporting agency. If so, I will be notified and be given the name of the agency providing that report.

III. I acknowledge that a telephonic facsimile (FAX) or photographic copy of this release shall be as valid as the original. This release is valid for most federal, state and county agencies including the Minnesota Department of Labor.

IV. I understand that if I am a resident of **Minnesota/Oklahoma (only)** I may obtain a copy of the report ordered, and now indicate my desire to do so by checking this box .

V. I hereby authorize, without reservation, any financial institution, law enforcement agency, information service bureau, school, employer or insurance company contacted by General Information Services, Inc. to furnish the information described in Section I.

VI. Communications with General Information Services, Inc. should be directed to PO Box 353, Chapin SC 29036 or (877) 590-4012.

## CANDIDATE COMPLETE THE FOLLOWING:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Today's Date

\_\_\_\_\_  
Please print full name

\_\_\_\_\_  
Other names known by

The following information is required by law enforcement agencies and other entities for positive identification purposes when checking public records. It is confidential and will not be used for any other purposes.

\_\_\_\_\_  
Month, Day and Year of Birth

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Current Home Address

\_\_\_\_\_  
Current City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Previous Home Address

\_\_\_\_\_  
Previous City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Driver's License Number and State

\_\_\_\_\_  
Name as it appears on License

### FAIR CREDIT REPORTING ACT NOTICE:

In accordance with the Fair Credit Reporting Act (FCRA, Public Law 91-508, Title VI), **revised effective September 30, 1997**, this information may only be used to verify a statement(s) made by an individual in connection with legitimate business needs. The depth of information available varies from state to state. Status of updates are available on request. Although every effort has been made to assure accuracy, General Information Services, Inc. cannot act as guarantor of information accuracy or completeness. Final verification of an individual's identity and proper use of report contents are the user's responsibility. General Information Services, Inc.'s policy requires purchasers of these reports to have signed a Service Agreement. This assures General Information Services, Inc. that users are familiar with and will abide by their obligations, as stated in the **FCRA, revised effective September 30, 1997**, to the individuals named in these reports. If information contained in this report is responsible for the suspension or termination of an employee or the application process, have the Candidate/employee contact General Information Services, Inc.

### NOTICE TO CALIFORNIA CANDIDATES

You have a right to obtain a copy of any consumer report or investigative consumer report obtained by (INSERT COMPANY NAME) by checking the box provided below. The report will be provided to you within three (3) business days after we receive the requested reports related to the matter investigated.

I request to receive a free copy of this report by checking this box.

Under section 1786.22 of the California Civil Code, you may view the file maintained on you by GIS during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services, by appearing at GIS in person or by mail. You may also receive a summary of the file by telephone. The agency is required to have personnel available to explain your file to you and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification.

## 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](http://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](http://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](http://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](http://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](http://www.ftc.gov/credit).
- **The FCRA gives several different federal agencies authority to enforce the FCRA:**

FOR QUESTIONS OR CONCERNS REGARDING	PLEASE CONTACT
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission Consumer Response Center- FCRA Washington, DC 20580 - 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 Programs Washington D.C. 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 Division of Compliance & Consumer Affairs Washington, DC 20429 - 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



# STATE ADDENDUM

## CONNECTICUT APPLICANTS – BACKGROUND INFORMATION

1. Have you ever been convicted of a crime? (A conviction will not necessarily be a bar to employment.)

Yes       No

If you answered “yes,” please describe the nature of the offense, the date of the convictions and the nature of any rehabilitation.

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**Note: You are not required to disclose the existence of any arrest, criminal charge or conviction, the records of which have been erased Connecticut General Statutes Sections 46b-146, 54-76o or 54-142a. Criminal records subject to erasure pursuant to Connecticut General Statutes Sections 46b-146, 54-76o or 54-142a are records related to (a) determinations of “delinquency” or that, as a child, you were a member of a family with service needs, (b) a ruling you are a “youthful offender”, (c) a finding you are not guilty for a criminal charge, or (d) a conviction for which you have received an “absolute pardon”. Any person whose criminal records have been erased pursuant to Connecticut General Statutes Sections 46b-146, 54-76o or 54-142a shall be deemed to never have been arrested within the meaning of the general statutes with respect to the proceedings so erased and may so swear under oath.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

# STATE ADDENDUM

## MASSACHUSETTS APPLICANTS

**Note: An applicant for employment with a sealed record on file with the commissioner of probation may answer “no record” with respect to an inquiry herein relative to prior arrests, criminal court appearances or convictions. An applicant for employment with a sealed record on file with the commissioner of probation may answer “no record” to an inquiry herein relative to prior arrests or criminal court appearances. In addition, any applicant for employment may answer “no record” with respect to any inquiry relative to prior arrests, court appearances and adjudications in all cases of delinquency or as a child in need of services which did not result in a complaint transferred to the superior court for criminal prosecution.**

1. Have you ever been convicted of a felony?

Yes       No

2. Have you been convicted of a misdemeanor within the past five years or have you completed a period of incarceration within the past five years for any misdemeanor (other than a first conviction for any of the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, affray, or disturbance of the peace)?

Yes       No

3. If the answer to the above question is “yes,” please state whether you were convicted more than five years ago for any offense (other than a first conviction for any of the following misdemeanors: drunkenness, simple assault, speeding, minor traffic violations, affray, or disturbance of the peace):

Yes       No

A criminal conviction will not necessarily be a bar to employment. To help us evaluate your application, please describe any criminal conviction(s) for which you answered “yes”, above, listing the nature of your offense and your rehabilitation since the conviction(s):

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\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Date**