



Iowa Student Loan® is the parent company and sole owner of Aspire Resources Inc.®
 6775 Vista Drive | West Des Moines, IA 50266
 Phone: (800) 243-7552 | Fax: (515) 273-7244

Application for Employment

Name _____
 Last First Middle

Address _____
 Street City State ZIP

Home Phone _____ Work Phone _____ Cell Phone _____

Email _____

Other names you have been known by _____

Person who can always get a message to you _____ Phone Number _____

Position for Which You Are Applying

Position Name(s) _____

Expected Salary _____

Date Available _____

Hours you are available to work _____

General Information

Have you ever worked here before? Yes Date _____ No

Have you ever applied here before? Yes Date _____ No

Are you legally eligible for employment in this country? Yes No

(Proof of U.S. citizenship or immigration status will be required if employed.)

Have you ever been convicted of a crime other than a traffic/speeding violation? Yes No

If "Yes," explain date, nature of offense and result of conviction (an affirmative response will not automatically exclude you from consideration.)

Employment History

List your last three employers, starting with the most recent, including military experience. Explain all gaps in employment in the comments section below. You may exclude organization names that indicate race, color, religion, gender, national origin, handicap or other protected status.

Employer	Telephone	Dates Employed		Job Duties
		From	To	
Address/City/State				
Job Title	Hourly Rate/Salary		May we contact this employer?	
	Starting	Final		
Supervisor	Reason for Leaving			Yes
				No

Employer	Telephone	Dates Employed		Job Duties
		From	To	
Address/City/State				
Job Title	Hourly Rate/Salary		May we contact this employer?	
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Supervisor	Reason for Leaving			Yes
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Employer	Telephone	Dates Employed		Job Duties
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Address/City/State				
Job Title	Hourly Rate/Salary		May we contact this employer?	
	Starting	Final		
Supervisor	Reason for Leaving			Yes
				No

Have you ever been discharged from any job? Yes No

If "Yes," please list the employer's name, address and reason

Comments (including explanation of any gaps in employment)

Please list any professional licenses, certifications, designations, etc. or any professional/civic memberships that relate to your ability to perform the job for which you have applied.

Educational Background

List the schools you have attended. Indicate the course of study (major/minor), the number of years completed, whether or not you graduated, and the degree or diploma you earned. You may be requested to furnish official transcripts.

School and Location	Course of Study	Number of Years Attended	Did you graduate?	Degree or Diploma
High School				
College				
Technical				
Other				

Office Skills (If Applicable)

Word 10 Key _____ (kspm)

Excel Typing _____ (wpm)

PowerPoint Other _____

References

List the name/telephone number of three business references who are not related to you:

Name	Company Name	Relationship to You	Telephone

Referral Source

Advertisement
Publication _____

Employment Agency

Iowa Student Loan or Aspire Resources Inc. Employee
Name of Employee _____

School Placement Office

Other _____

Walk-In

Names of friends or relatives employed by Iowa Student Loan or Aspire Resources Inc.

We are an equal opportunity/affirmative action employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, age, disability, protected veteran status, sexual orientation, gender identity, or any other characteristic protected by law.

We are a federal contractor that takes affirmative action to employ and advance in employment qualified minorities, women, persons with disabilities and protected veterans. Any employee or applicant for employment who is qualified under the applicable regulations will be covered under the affirmative action program by providing their status to the company. Submission of this information is voluntary, will be kept confidential and is not a requirement for employment.

Applicant's Statement

I understand that the employer follows an "employment at will" policy, in that I or the employer may terminate my employment at any time, or for any reason consistent with applicable state or federal law; this "employment at will" policy cannot be changed verbally or in writing, unless the change is specifically authorized in writing by the president of this organization. I understand that this application is not a contract of employment. I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit satisfactory proof of employment authorization and identity; failure to submit such proof will result in denial of employment.

I understand this application will be active for a period of 90 days; after that time, if I wish to be considered for employment, I must submit a new application.

I understand that the employer retains the right to thoroughly investigate my work and personal history and verify all data given on this application, on related papers and in interviews. I authorize all individuals, schools and firms named therein to provide any information requested about me, and I release them from all liability for damage in providing this information.

I understand that in processing my application, the employer may perform a credit check and a background check.

I understand that Iowa Student Loan is the parent company and sole owner of Aspire Resources Inc., and that any and all information found in any background check may be shared between the two entities and may be subject to review with legal counsel.

Additionally, any negative information may adversely impact my current employment situation with either entity (if applicable).

I certify that all the statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

Applicant's Signature _____ Date _____

You will be unable to save this document.

Please print a completed employment application for your records and fax or mail one to Human Resources.

6775 Vista Drive | West Des Moines, IA 50266

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Voluntary Self-Identification Forms

Applicant Name _____ Date _____

Iowa Student Loan and Aspire Resources Inc. are equal opportunity/affirmative action employers. All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, age, disability, protected veteran status, sexual orientation, gender identity or any other characteristic protected by law.

Providing the information is voluntary. The information is kept confidential and will not result in adverse employment action. The information is used to fulfill reporting requirements

Iowa Student Loan and Aspire Resources Inc. are committed to working with and providing reasonable accommodation to individuals with disabilities. If you need assistance completing the employment application or these forms, please contact HRDept@studentloan.org or call (515) 273-7178. For TTY support, please contact Relay Iowa by dialing 711.

In compliance with Executive Order 11246, as amended [41 CFR §60-1 and §60-2], we request the following information from applicants:

Gender

- Male
- Female
- I choose not to self-identify.

Race/Ethnicity

(Please check one of the descriptions below corresponding to the ethnic group with which you identify.)

- Hispanic or Latino: A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
- White (Not Hispanic or Latino): A person having origins in any of the original peoples of Europe, the Middle East or North Africa.
- Black or African American (Not Hispanic or Latino): A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino): A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- Asian (Not Hispanic or Latino): A person having origins in any of the original peoples of the Far East, Southeast Asia or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- American Indian or Alaska Native (Not Hispanic or Latino): A person having origins in any of the original peoples of North and South America (Including Central America) who maintains tribal affiliation or community attachment.
- I choose not to self-identify.

Applicant Name _____ Date _____

As government contractors, Iowa Student Loan and Aspire Resources Inc. are also subject to the Vietnam Era Veterans' Readjustment Assistance Act of 1974, as amended by the Jobs for Veterans Act of 2002, 38 U.S.C. 4212 (VEVRAA), which requires government contractors to take affirmative action to employ and advance in employment veterans in the following classifications:

- ▶ A "**disabled veteran**" is one of the following:
 - a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs; or
 - a person who was discharged or released from active duty because of a service-connected disability.
- ▶ A "**recently separated veteran**" means any veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U.S. military, ground, naval, or air service.
- ▶ An "**active duty wartime or campaign badge veteran**" means a veteran who served on active duty in the U.S. military, ground, naval or air service during a war, or in a campaign or expedition for which a campaign badge has been authorized under the laws administered by the Department of Defense.
- ▶ An "**Armed Forces service medal veteran**" means a veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.

Protected veterans may have additional rights under USERRA — the Uniformed Services Employment and Reemployment Rights Act. In particular, if you were absent from employment in order to perform service in the uniformed service, you may be entitled to be reemployed by your employer in the position you would have obtained with reasonable certainty if not for the absence due to service. For more information, call the U.S. Department of Labor's Veterans Employment and Training Service (VETS), toll-free, at 1-866-4-USA-DOL.

If you believe you belong to any of the categories of protected veterans listed above, please indicate by checking the appropriate box below. As a government contractor subject to VEVRAA, we request this information in order to measure the effectiveness of the outreach and positive recruitment efforts we undertake pursuant to VEVRAA.

- I identify as one or more of the classifications of protected veteran listed above.
- I am not a protected veteran.

Voluntary Self-Identification of Disability

Form CC-305
OMB Control Number 1250-0005
Expires 1/31/2017
Page 1 of 2

Why are you being asked to complete this form?

Because we do business with the government, we must reach out to, hire, and provide equal opportunity to qualified people with disabilities.¹ To help us measure how well we are doing, we are asking you to tell us if you have a disability or if you ever had a disability. Completing this form is voluntary, but we hope that you will choose to fill it out. If you are applying for a job, any answer you give will be kept private and will not be used against you in any way.

If you already work for us, your answer will not be used against you in any way. Because a person may become disabled at any time, we are required to ask all of our employees to update their information every five years. You may voluntarily self-identify as having a disability on this form without fear of any punishment because you did not identify as having a disability earlier.

How do I know if I have a disability?

You are considered to have a disability if you have a physical or mental impairment or medical condition that substantially limits a major life activity, or if you have a history or record of such an impairment or medical condition.

Disabilities include, but are not limited to:

- Blindness
- Autism
- Bipolar disorder
- Post-traumatic stress disorder (PTSD)
- Deafness
- Cerebral palsy
- Major depression
- Obsessive compulsive disorder
- Cancer
- HIV/AIDS
- Multiple sclerosis (MS)
- Impairments requiring the use of a wheelchair
- Diabetes
- Schizophrenia
- Missing limbs or partially missing limbs
- Intellectual disability (previously called mental retardation)
- Epilepsy
- Muscular dystrophy

Please check one of the boxes below:

- YES, I HAVE A DISABILITY (or previously had a disability)
- NO, I DON'T HAVE A DISABILITY
- I DON'T WISH TO ANSWER

Your Name

Today's Date

Voluntary Self-Identification of Disability

Form CC-305
OMB Control Number 1250-0005
Expires 1/31/2017
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Reasonable Accommodation Notice

Federal law requires employers to provide reasonable accommodation to qualified individuals with disabilities. Please tell us if you require a reasonable accommodation to apply for a job or to perform your job. Examples of reasonable accommodation include making a change to the application process or work procedures, providing documents in an alternate format, using a sign language interpreter, or using specialized equipment.

ⁱ Section 503 of the Rehabilitation Act of 1973, as amended. For more information about this form or the equal employment obligations of Federal contractors, visit the U.S. Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) website at www.dol.gov/ofccp.

PUBLIC BURDEN STATEMENT: According to the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. This survey should take about 5 minutes to complete.