### Jackson Wealth Management, LLC

Job Application

#### **Applicant Information**

Last Name:	First:			M.I.:	Date:	
Street Address:					Apartment	:/Unit #:
City:	State:			Zip:	Phone: (	)
Email Address:			Date Availabl	le:	Desired Sa	lary:
Position Applied For:						
Are you a citizen of the United States?	Yes	No	If no, are you work in the U	authorized to J.S.?	Yes	No
Do you have the legal right to work for any employer in the U.S.?	Yes	No	If no, explain	1:		
Have you ever been convicted of a felony?	Yes	No	If yes, explai	n:		
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#### **Career Needs & Activities**

Willing to relocate?	Yes	No	If no, explain:		
Amount of travel acceptable:		0-25%	25-50%	50-75%	75-100%
What are your career object	ives?				

#### **Professional Information**

Designations/Certifications:	FINRA Licenses Held:
Other Licenses Held (Variable Annuity, Life, Health, etc.):	
States in Which you are Licensed or Registered:	
Individual CRD#:	Have you ever been registered as an IAR: Y N
Memberships in Professional Organizations:	

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Name of High School:	Location:
Approximate Number in Graduating Class:	Rank from the top:
Final Grade Point Average: (A =)	
Extracurricular Activities:	

#### College/Graduate School

Name and Location	Da From	tes To	Degree	Major	Grade-Point Average	Total Credit Hours	Extracurricular activities, honors, and awards
	FIOIII	10					and awards
					(A =)		
					(A =)		
					(A =)		

#### **Military Experience**

If in service, indicate branch:					
Date (Mo/Yr) Entered:  Date (Mo/Yr) Discharged:					
Nature of Duties:					
Highest Rank or Grade:	Terminal Rank or Grade:				

#### **Additional Background Information:**

- 1. Have you ever declared a personal bankruptcy and/or have any unsatisfied judgments or liens against you?

  Yes No
- 2. While you exercised control over it, has an organization made a compromise with creditors, filed a bankruptcy petition or been the subject of an involuntary bankruptcy petition?

  Yes No
- 3. Within the past 10 years, has any corporation, partnership, or business in which you or your family members were a partner, officer, shareholder director, been a party to any lawsuits, judgments, bankruptcies or liens?

  Yes No

4	. Have you ever been fined by an insurance or securities regulatory authority?	Yes	No
5	. Have you ever had your securities registration or insurance license denied, suspended or revoked by a State or Federal		
	agency?	Yes	No
6	. Are you indebted to an insurance company, general agent,	.,	
	broker or manager, or any registered Broker/Dealer?	Yes	No
7	. Have you ever resigned, been discharged or permitted to		
	resign, or been terminated from any position or agency as a		
	result of being charged or accused of violating any standard		
	of conduct law, rule, or regulation concerning investments,		
	securities, insurance, banking, commodities, or real estate?	Yes	No
8	. Have you ever been charged with, convicted of, plead guilty		
	to or plead no contest to any felony or misdemeanor		
	concerning investments, insurance, securities, banking,		
	real estate, commodities, fraud, theft, forgery, counterfeiting,		
	extortion or false statements or omissions?	Yes	No
9	. Have you ever been charged with or convicted of, or plead		
	guilty to, or plead no contest to any misdemeanor or felony		
	not otherwise reported in question 7 above?	Yes	No
1	0. Do you currently have any potential investment related action		
•	or customer complaint pending with the SEC, FINRA or any		
	other self-regulatory organization?	Yes	No
1	1. Based upon activities that occurred while you exercised		
	control over it, has an organization ever been charged with or		
	convicted of, or plead guilty to, or plead no contest to any		
	misdemeanor or felony?	Yes	No
1	2. Have you ever had an authorization to act as an attorney,		
	accountant or federal contractor that was revoked or		
	suspended?	Yes	No
1	3. Have you ever been known personally by any other name or		
	have you ever conducted business or carried bank accounts in		
	any other name than the one you have indicated?	Yes	No
1	4. Do you have Errors and Omissions Insurance through your		
•	current Broker/Dealer?	Yes	No
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• Please attach a written explanation and court documents to all "yes" answers

## I hereby authorize any employer, insurance company, managing associate, educational institution, consumer reporting agency, criminal justice agency, insurance department or individual having any information relating to my activities to release such information to Jackson Wealth Management, LLC, any of its subsidiaries or affiliates, and any of its Product Providers or their affiliates. This information may include, but is not limited to, employment and job history, academic records, credit reports, disciplinary, arrest and conviction records and personal history. I agree that a photographic copy of this authorization shall be as valid as the original.

Authorization for Release of Information:

# Application for Employment Disclaimer: I certify that answers given in the job application are true, accurate, and complete to the best of my knowledge. I authorize investigation into all statements I have made on this application as may be necessary for reaching an employment decision. I understand that I may be asked to arrange reference calls with managers I've worked for over the past 10 years. In the event I am employed, I understand that any false or misleading information I knowingly provided in my job application or interview(s) may result in discharge and/or legal action. I understand that if employed, I am required to abide by all rules and regulations of the employer and any special agreements reached between the employer and me. I understand that all professional background information and work experience will be cross referenced with information included in both FINRA's BrokerCheck® system and the Investment Advisor Public Disclosure Program.

Signature	Date

#### **Work Experience**

\*Provide complete employment history for the past 10 years. Account for all time including full and part-time employments, selfemployment, and homemaking. Also include statuses such as unemployed, full-time education, extended travel, or other similar statuses. If you have held various positions within the same company, please complete a new section for each position. List in order of most recent job first. Use as many pages as necessary. All professional background information and work experience will be cross referenced with information included in both FINRA's BrokerCheck® system and the Investment Advisor Public Disclosure Program.\*

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Employer Name:			Phone Number:			
Type of Business:						
Company Address:		City,	State, Zip:			
Supervisor Name: Title:			Physical Home Address During Employment:			
Start Date:			End Date:			
Starting Job Title:			Ending Job Title:			
Starting Salary: Total Comp	pensation \$:	Base \$ Bonus \$		Bonus \$		
Ending Salary: Total Comp	pensation \$:	Base \$		Bonus \$		
Reason for Leaving (be specific):	Type of Position:    Full-time		Hours/ week  Exempt Non-Exempt	Did you supervise employees?  YN  Can this employer be contacted?		
Work Experience						

Employer Name:			Phone Number:			
Type of Business:						
Company Address:			City, State, Zip:			
Supervisor Name:			Physical Home Address During Employment:			
Title: Start Date:			End Date:			
Starting Job Title:			Ending Job Title:			
Starting Total Compensa	tion \$:		Base \$	Bonus \$		
Ending Total Compensati	ion \$:		Base \$	Bonus \$		
Reason for Leaving (be specific):	Type of Position:  Full-time  Contract/Temporary	] Part-tii ] Intern		Did you supervise employees?  YN  Can this employer be contacted?		