

Employment Application

Personal Information									
Name (Last, First, MI)				Social Security Number					
Street Address				City, State, Zip					
Phone Number				Email Address					
Position applied for (if apprentice include year):				Date available for Work:					
How did you hear about the position?				[] Full Time [] Part Time					
Education									
	Name & Address		Years Course of Study		Degree/ Diploma				
High School									
College									
Other (Specify)									
List any seminars, classes or other education not listed above which may help qualify you for this position.									
Employment	History List below all present & past employers over the	past 10 years, st	arting with vo	ur most recent employer.					
	ur previous employers?	past 10 years) st	a. a. g man yo	a. meareacht an proyen					
Employer		Supervisor:		From:	To:				
City, State, Zip		Phone		Start Pay:	End Pay:				
Position		Reason for Leaving:							
Essential job functions:									
Employer		Supervisor:		From:	То:				
City, State, Zip		Phone		Start Pay:	End Pay:				
Position			Reason for Leaving:						
Essential job function	ons:								
Employer		Supervisor:		From:	To:				
City, State, Zip		Phone		Start Pay:	End Pay:				
Position			Reason for Leaving:						
Essential job functions:									
List any professional, trade, business or civic activities and offices held. You may exclude membership that would reveal gender, race, religion, national origin, ancestry, age, disability, or any other protected status.									
List any language other than English that you can speak, read, or write that could be of benefit to the position applied for:									
Fluent Speak			Good		Fair				
-	Read								
	Write								
If hired, what value would you add to the company?									
	and the same you doe to the company.								
Describe what you believe are the most unique features of your work history:									
Ī									

References List below three persons not rela	ted to you who have knowledge of your work perfo	rmance within the last 5 years						
Name	Occupation	Telephone	Relationship & Year	s Known				
Employment Application – Add								
Do you have any friends/ relatives emplo	yed by the company? If yes, please provide th	eir names & relationship to you.	[]Yes	[] No				
Are you currently employed?			[] Yes	[] No				
Are you currently on "lay off" status & sul	oject to recall?		[] Yes	[] No				
If under 18 years of age, can you provide			[]Yes	[] No				
	enship or proof of legal right to work in the US		[] Yes	[] No				
	tions of the job for which you are applying wit		[]Yes	[] No				
position being applied for? If Yes, please e		ou can perform all those essential functions and dutie	es of the [] Yes	[] No				
position being applied for: if res, please e	хрант.							
If driving is a requirement of the position	applied for, have you in the last 7 years been	convicted of Driving Linder the Influence?	[] Yes	[] No				
If hired, do you have a reliable means of t		convicted of briving order the influence:	[]Yes	[]No				
If hired, would you be able to travel or wo			[]Yes	[] No				
Have you ever been convicted of a felony	or misdemeanor? If Yes, please explain:		[] Yes	[] No				
Please r	ead each statement closely and init	tial each acknowledging your understand	ling					
· · · · · · · · · · · · · · · · · · ·		mitted to the principles of equal employment oppor		to make				
		State and local laws providing for equal employment						
		environment that is free of sexual harassment and c						
		deral, State or local laws. The Company will make rea						
those physical or mental limitations of an oth	erwise qualified employee unless undue hard	Iship would result for the company.						
	-	Company will not tolerate any form of unlawful disc						
		will be subject to appropriate discipline, up to and in						
		and other verbal or physical conduct of a sexual natur						
		of an individual's employment; (2) Submission to or a ct has the purpose or effect of unreasonably interferi						
performance or creating an intimidating, host		thas the purpose of effect of difficasoriably interferin	ng with an inalvidual 3 w	OIK				
		you are offered a position with the Company, you ma	ay be given a drug/alcoh	ol test as a				
Disclosure to Applicants Concerning Drug/Alcohol Testing If you are offered a position with the Company, you may be given a drug/alcohol test as a condition of employment. Your refusal to timely submit to a drug/alcohol test or your failure to pass such a test means you will not be employed by this company. Neither the								
		ompany employee. The test results will be kept conf						
		able grounds to believe the individual may alter or sul	bstitute the specimen. N	Negative test				
results are required as a condition of employr								
		knowingly withheld any information that might adve						
. ,	•	wledge. I further certify that I have personally comple	• • • • • • • • • • • • • • • • • • • •					
immediate discharge if I am employed, regard		used to secure employment, shall be grounds for reje	ection of this application	OI IOI				
		employment will be "at-will", which means that the	Company may terminat	o the				
		ikewise, the Company will respect my right to termin						
		ration, whether expressed or implied to the contrary						
promise or representation contrary to the for	egoing is binding on the Company unless ma	de in writing and signed by the Company's president.	•					
Testing Authorization If of	fered a position with the Company, I hereby	agree to any legally permitted physical, psychological	, skill, drug or medical te	st required by				
the Company as a condition of employment.								
		ts and references contained in this application. Said i						
driving, criminal background, references and	other background checks. By applying for thi	s job, I also authorize post-hire investigation into my o	credit, driving and crimir	al background				
I have read and understand the shows self-	ctatements and agree to be bound but here:	fomployed by the company I cortify that my company	r aro true and complete	to the best of				
		f employed by the company. I certify that my answer ng information in my application or interview may re		to the best of				
,	,	application of interview may re-	release.					
Signature:	Dat	te:						