



****APPLICATION FOR EMPLOYMENT****

WE ARE AN EQUAL OPPORTUNITY EMPLOYER. ALL APPLICANTS ARE CONSIDERED FOR EMPLOYMENT BASED ON THEIR QUALIFICATIONS, WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, AGE, DISABILITY, HANDICAP, MARITAL OR VETERAN STATUS.

DATE OF APPLICATION: _____

INTRODUCTORY INFORMATION

NAME: _____
(LAST NAME) (FIRST NAME) (MIDDLE)

ADDRESS: _____
(STREET) (CITY) (STATE) (ZIP)

TELEPHONE: _____

ARE YOU A CITIZEN OF THE U.S. OR AN ALIEN AUTHORIZED TO WORK IN THE US
YES ___ NO ___

MARITAL STATUS: SINGLE _____ MARRIED _____
DIVORCED _____

STATE YOUR AGE: _____ AND DATE OF BIRTH: _____

POSITION DESIRED: _____ DATE YOU CAN START WORK: _____

WAGE DESIRED: _____ PER _____

ARE YOU WILLING TO TRAVEL? _____

DO YOU KNOW ANYONE WHO WORKS HERE? _____ WHO? _____

WHO REFERRED YOU TO THE COMPANY? _____

EDUCATION AND TRAINING

DID YOU COMPLETE HIGH SCHOOL? _____ ACQUIRE A G.E.D.? _____

IF NOT, YOUR HIGHEST GRADE COMPLETED WAS: _____

NAME AND LOCATION OF LAST SCHOOL ATTENDED: _____

JOB RELATED COURSES COMPLETED OR OTHER SKILLS
ACQUIRED: _____

COLLEGE OR GRADUATE SCHOOL
COMPLETED: _____

AREAS OF STUDY: _____

DEGREES RECEIVED: _____

LIST TRADE OR TECHNICAL SCHOOLS ATTENDED AND YEARS COMPLETED:

EMPLOYMENT HISTORY

PRESENT OR LAST EMPLOYER

NAME: _____

ADDRESS: _____

TELEPHONE NO.: _____ TYPE OF BUSINESS: _____

START DATE: _____ DEPARTURE

DATE: _____

STARTING POSITION: _____ STARTING PAY: _____

FINAL POSITION: _____ FINAL

PAY: _____

NAME AND TITLE OF IMMEDIATE

SUPERVISOR: _____

DESCRIPTION OF YOUR RESPONSIBILITIES: _____

REASON FOR LEAVING: _____

IF YOU ARE STILL EMPLOYED, MAY WE CONTACT THIS EMPLOYER AT THIS TIME? _____

NEXT PREVIOUS EMPLOYER

NAME: _____

ADDRESS: _____

TELEPHONE: _____ TYPE OF BUSINESS: _____

DATE HIRED: _____ DEPARTURE DATE: _____

STARTING POSITION: _____ STARTING

PAY: _____

FINAL POSITION: _____ FINAL

PAY: _____

NAME AND TITLE OF IMMEDIATE

SUPERVISOR: _____

DESCRIPTION OF YOUR RESPONSIBILITIES: _____

REASON FOR LEAVING: _____

MILITARY SERVICE

HAVE YOU EVER SERVED IN THE UNITED STATES ARMED FORCES? _____

STATE THE BRANCH AND LIST ANY JOB-RELATED SKILLS YOU ACQUIRED OR DUTIES YOU PERFORMED: _____

MISCELLANEOUS INFORMATION

HAVE YOU EVER BEEN CONVICTED OF A CRIME, OTHER THAN MINOR TRAFFIC OFFENSES?

IF YES, EXPLAIN: _____

A RECORD OF CRIMINAL CONVICTION DOES NOT NECESSARILY SERVE AS A BAR TO EMPLOYMENT.

THE POSITION YOU ARE APPLYING FOR MAY REQUIRE DRIVING COMPANY VEHICLES. PLEASE LIST YOUR CURRENT DRIVERS LICENSE NUMBER INCLUDING THE STATE:

PLEASE LIST ANY ENDORSEMENTS ON YOUR LICENSE (CDL, CLASS, ETC.) _____

HAS YOUR DRIVERS LICENSE EVER BEEN SUSPENDED OR REVOKED? _____

IF YES, EXPLAIN: _____

LIST ANY CITATIONS YOU HAVE RECEIVED IN THE LAST FIVE YEARS:

LIST ANY ACCIDENTS YOU HAD IN THE LAST FIVE YEARS:

PLEASE READ THE FOLLOWING PARAGRAPHS CAREFULLY

I CERTIFY THAT ALL THE INFORMATION I HAVE SUPPLIED ON THIS APPLICATION IS TRUE, ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE, AND THAT I HAVE NOT KNOWINGLY WITHHELD ANY INFORMATION WHICH, IF KNOWN TO THE COMPANY , WOULD AFFECT MY APPLICATION UNFAVORABLY. I UNDERSTAND THAT ANY FALSE, MISLEADING AND/OR INCOMPLETE STATEMENTS ON THIS APPLICATION AND/OR IN ANY INTERVIEW, CONSTITUTE SUFFICIENT CAUSE FOR THE COMPANY NOT TO EMPLOY ME, AND IF EMPLOYED, TO TERMINATE MY EMPLOYMENT.

I AUTHORIZE AN INVESTIGATION TO BE CONDUCTED CONCERNING ALL OF THE INFORMATION I HAVE SUPPLIED ON THIS APPLICATION, AND ALL OTHER INFORMATION WHICH THE COMPANY DEEMS TO BE RELEVANT TO MY QUALIFICATIONS FOR EMPLOYMENT. I FURTHER AUTHORIZE

WITNESS
DATE