

THIS APPLICATION WILL BE ACTIVE FOR 45 DAYS

All statements made by applicants for employment on this application form will be carefully checked for accuracy. We offer equal employment opportunities to all persons without regard to race, religion, age, sex, national origin, or handicap. The use of this form does not mean there are positions open and does not obligate us in any way.

PERSONAL INFORMATION

Position(s) Applied For \_\_\_\_\_ Date of Application \_\_\_\_\_

Name \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

Phone No. (\_\_\_\_\_) \_\_\_\_\_ Social Security No. \_\_\_\_\_

In case of emergency, notify: Name \_\_\_\_\_ Address \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

Have you ever filed an employment application here before?  No  Yes If Yes: When? \_\_\_\_\_

Have you ever been employed here before?  No  Yes If Yes: When? \_\_\_\_\_ Reason for leaving  Quit  Discharged  Laid-Off

Do you have a valid Driver's License?  No  Yes If No, Do you have a state issued I.D.?  No  Yes

Driver's License/I.D. No. \_\_\_\_\_ Class \_\_\_\_\_ State \_\_\_\_\_ Expiration Date \_\_\_\_\_

Rate of Pay Required? \_\_\_\_\_ Are you interested in the company's hospitalization insurance?  No  Yes

Are you available for full time work?  No  Yes Are you interested in the company's dental insurance?  No  Yes

Are you legally eligible for employment in the United States?  No  Yes Over 18 years of age?  No  Yes

**(Proof is required for employment)** Will you work overtime if asked?  No  Yes

Did you serve in the U.S. Armed Forces?  No  Yes If Yes, in what Branch? \_\_\_\_\_

Vietnam Veteran?  No  Yes

EDUCATION

	Name and Location of School	No. of Yrs	Did You Graduate?	Degree or Subjects
High School				
College				
Trade, Business, Correspondence Schools				

EMPLOYMENT

List Present or Last Employer

Employer's Name \_\_\_\_\_ Telephone(\_\_\_\_\_) - \_\_\_\_\_

Address \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Name of Foreman \_\_\_\_\_ Rate of Pay: \_\_\_\_\_

State Job Title and Describe Your Work \_\_\_\_\_ Start \_\_\_\_\_ Last \_\_\_\_\_

Other Skills, Qualifications, & Experience Not Indicated Above \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL."

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE, AND RELEASE ALL PARTIES FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM FURNISHING SAME TO YOU.

"I UNDERSTAND AND AGREE THAT, IF HIRED, MY EMPLOYMENT IS FOR NO DEFINITE PERIOD AND MAY BE TERMINATED AT ANY TIME WITHOUT PRIOR NOTICE."

Before signing this application, you should ask for assistance if you do not understand any statement or need help in completing the application.

DATE \_\_\_\_\_ SIGNATURE X \_\_\_\_\_