

SAVE PRINT EMAIL

## An Equal Opportunity Employer

## APPLICATION FOR EMPLOYMENT

This application is active for 30 days.

Answer each question fully and accurately. If you need additional space, please continue your answer(s) on a separate sheet of paper. No action can be taken on this application until all questions have been answered. PLEASE PRINT.

Job Applied For:				Today's Date:	
Employment status sought:	Full time [ ]	Part Tim	ne[]	Temporary [ ]	Seasonal [ ]
When are you available for employ	ment?				
	PER	SONAL INFOR			
Last Name	F	irst Name			Middle Name
If you worked under another name					
Present Street Address:	C	lity	State		Zip Code
() Telephone Number			Social Sec	urity Number	
Are you at least 18 years of age?	Y	es [ ]	No [ ]		
Have you ever applied to work here	before? Y	es [ ]	No [ ]		
Are you eligible to work in the Unite	d States? Y	es [ ]	No [ ]		
Do you have any commitments or a	greements with anot	her employer w	hich might affect	your employment he	re?Yes[] No[]
If yes, please explain:					
Do you have a valid driver's license	? Y	es [ ]	No [ ]		
Drivers' License Number:				State:	

## REFERENCES

Give three references, not relatives or former employers.

Name	Address	Phone #	Yrs.	Occupation
			Acquainted	

**Qualifications and Special Skills** 

## WORK HISTORY

List names of employers in consecutive order with present or last employer listed first. If self-employed, give firm name and supply business references.

Company Name	Start Date (mo/day/yr)	End Date (mo/day/yr)
Address	Supervisor's Name	Phone Number
Duties		
Reason for Leaving		
May we	contact your present employer? Ye	s 🗌 No 🗌 N/A

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Company Name	Start Date (mo/day/yr)	End Date (mo/day/yr)
Address	Supervisor's Name	Phone Number
Duties		
Reason for Leaving		

May we contact your present employer?

Yes No N/A

Company Name	Start Date (mo/day/yr)	End Date (mo/day/yr)
Address	Supervisor's Name	Phone Number
Duties		
Reason for Leaving		

May we contact your present employer?

Yes No N/A

Company Name	Start Date (mo/day/yr)	End Date (mo/day/yr)
Address	Supervisor's Name	Phone Number
Duties		
Reason for Leaving		

Yes No N/A May we contact your present employer?

Company Name Start Date (mo/day/yr) End Date (mo/day/yr) Address Supervisor's Name Phone Number Duties Reason for Leaving

Yes 🗌 No 🗌 N/A May we contact your present employer?

I certify that, to the best of my knowledge, the information contained in this application is true and complete. I understand that my employment may be denied or terminated if I provide false, misleading, or incomplete information during the hiring process or my employment.

I understand that, if I am hired, I must produce applicable documents showing that I am lawfully authorized to work in the United States, in accordance with the Immigration Reform and Control Act of 1986, as amended.

I understand and agree that my prior employers, education institutions, and other references, listed on this application may be contacted by the Company. These references are authorized to give the Company any and all pertinent information they may have. I release all persons or entities involved, including the Company, from all liability arising from the contact and provision of information.

I agree to submit to any post-offer screening, pre-employment testing or physicals, as required by the Company.

I agree to conform to all the Company's policies, rules and procedures.

Furthermore, I understand and agree that nothing contained in this employment application, the granting of an interview, or in the offer of employment creates a contract for employment between the Company and myself. If an employment relationship is established, I understand that, unless specifically limited in an express, formally executed contract, I have the right to terminate my employment at any time and for any reason and the Company has the same right.

Signature

Date

School or Experience. ONLY INDICATE THE YEARS OR MONTHS

OPERATION		SCHOOL/EXPERIENCE	YEARS/MONTHS
Fabrication:	Stainless Steel Mild Steel Aluminum		
Welding:	Wirefeed / MIG TIG Purge Stick Aluminum		
Machinery:	Shear Brake Drill Iron Worker Plasma Torch Oxy-acetylene Torch Lathe Deburring Machine Grinding Machine Sandblasting		
Production	Blueprint reading		
Operations:	Metal Cleaning Painting, Spray Equipment Installation Heat treating Operations Electrical Wiring for Machinery Work Methods – Work Planning Supervisory Experience Design-Engineering Experience Design-Engineering Experience		

Please List additional skills or experience you feel are important for the Company to know.