



# APPLICATION FOR EMPLOYMENT

**Fill out form completely**

**We consider applicants for all positions without regard to race, color, religion, creed, gender, National origin, age, disability, marital or veteran status, or any other legally protected status.**

**\*\* TO ENSURE FULL CONSIDERATION, YOU MUST FILL OUT THE APPLICATION COMPLETELY. \*\***

(PLEASE PRINT)

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

How Did You Learn About Us?

☐ Advertisement ☐ Friend ☐ Relative ☐ Inquiry ☐ Drive-by ☐ Other \_\_\_\_\_

Last Name		First Name		Middle Name	
Address	Number	Street	City	State	Zip Code
Telephone Number(s)		Day	Evening	Social Security Number	

**PLEASE FILL OUT COMPLETELY / CHECK EVERY BOX!**

Best time to contact you at home is: \_\_\_\_\_ am / pm

If you are less than 18 years of age, can you provide required proof of your eligibility to work? ☐ Yes ☐ No

What choice best reflects your intake of alcohol? ☐ never ☐ occasionally ☐ moderately ☐ frequently

Do you take any illicit drugs? ☐ Yes ☐ No Would you be willing to submit to a drug test? ☐ Yes ☐ No

Do any of your friends or relatives work here? If Yes, state name & relationship \_\_\_\_\_ ☐ Yes ☐ No

Are you currently employed? ☐ Yes ☐ No

May we contact your present employer? ☐ Yes ☐ No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? ☐ Yes ☐ No  
*Proof of citizenship or immigration status will be required upon employment.*

Do you have a valid and current driver's license? ☐ Yes ☐ No

Do you have a valid and current commercial driver's license [CDL]? ☐ Yes ☐ No

If no are you willing and able to get a CDL within 90 days? ☐ Yes ☐ No

Date available for work \_\_\_\_/\_\_\_\_/\_\_\_\_ What is your desired salary range? \_\_\_\_\_

Are you available to work: ☐ Full Time  
☐ Part Time (please indicate Mornings Afternoon Evenings)  
☐ Temporary (please indicate dates available \_\_\_\_/\_\_\_\_ thru \_\_\_\_/\_\_\_\_)

Are you currently on "lay-off" status and subject to recall? ☐ Yes ☐ No

EDUCATION

School	Name & Address of School	Course of Study	Years Completed	Diploma/Degree
High School				
Undergraduate				
College				
Graduate/				
Professional				
Other				
(Specify)				

WORK EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations that indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	Dates Employed	Work Performed
	From To	
Address	[ ] [ ]	
Telephone Number(s)		
Starting/Present Job Title	Hourly Rate / Salary Starting Final	
Supervisor	[ ] [ ]	
Reason for Leaving	May We Contact?	[ ] Yes [ ] No

Employer	Dates Employed	Work Performed
	From To	
Address	[ ] [ ]	
Telephone Number(s)		
Starting/Present Job Title	Hourly Rate / Salary Starting Final	
Supervisor	[ ] [ ]	
Reason for Leaving	May We Contact?	[ ] Yes [ ] No

Employer	Dates Employed	Work Performed
	From To	
Address	[ ] [ ]	
Telephone Number(s)		
Starting/Present Job Title	Hourly Rate / Salary Starting Final	
Supervisor	[ ] [ ]	
Reason for Leaving	May We Contact?	[ ] Yes [ ] No

**Other Qualifications** *Summarize special job-related skills and qualifications acquired from employment or other experience.*

*On the items listed below, circle the number next to each item which BEST describes your familiarity on that particular subject. (1 = LEAST familiar - 5 = VERY familiar)*

ALIGNMENTS	1	2	3	4	5	A/C - EVAC & RECHARGE	1	2	3	4	5
BODYWORK	1	2	3	4	5	BUFFING	1	2	3	4	5
FIBERGLASS REPAIR	1	2	3	4	5	WELDING - ALUMINUM	1	2	3	4	5
FRAME MACHINE	1	2	3	4	5	WELDING - GALVANIZED	1	2	3	4	5
PAINT WORK	1	2	3	4	5	PLASMA CUTTER	1	2	3	4	5
MECHANICAL WORK	1	2	3	4	5	TORCHES	1	2	3	4	5

Are you paint certified? \_\_\_\_\_ If yes, with who: \_\_\_\_\_

Do you own your own tools?    ☐ Yes        ☐ No    If YES, approximate net worth of your inventory:   \$\_\_\_\_\_

Do you have opposition to working outside in all seasons? ☐ Yes    ☐ No

Are you will and able to fill out time sheets and paperwork in a neat and orderly fashion? ☐ Yes    ☐ No

Are you willing and able to follow rules and management practices? ☐ Yes    ☐ No

Name	Phone Number	Best Time to Call	Occupation
1) _____			
2) _____			
3) _____			

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an “*at will*” nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this “*at will*” employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

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Date