



Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO If yes, when? _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

PLEASE MARK ALL PREVIOUSLY USED SKILLS/TOOLS

WELDING	<input type="checkbox"/>	FORKLIFT	<input type="checkbox"/>
SHEET METAL WORK	<input type="checkbox"/>	OVERHEAD CRANE	<input type="checkbox"/>
FABRICATION	<input type="checkbox"/>	CDL/TRUCK DRIVING	<input type="checkbox"/>
ELECTRICAL	<input type="checkbox"/>	PRESS BREAK	<input type="checkbox"/>
PLUMBING	<input type="checkbox"/>	HAND BREAK	<input type="checkbox"/>
CONTROL PANELS	<input type="checkbox"/>	SHEAR	<input type="checkbox"/>
SIDING	<input type="checkbox"/>	PIPE BENDER	<input type="checkbox"/>
WOODWORK/PALLET BUILDING	<input type="checkbox"/>	PIPE THREADER	<input type="checkbox"/>
ASSEMBLY	<input type="checkbox"/>	PLASMA CUTTER	<input type="checkbox"/>
SHIPPING/RECEIVING	<input type="checkbox"/>	CUTTING TORCHES	<input type="checkbox"/>
COMPUTER	<input type="checkbox"/>	BRAZING	<input type="checkbox"/>
MS OFFICE	<input type="checkbox"/>	SNIPS	<input type="checkbox"/>
AUTOCAD	<input type="checkbox"/>	DRILLS	<input type="checkbox"/>
SOLIDWORKS	<input type="checkbox"/>	HOLE KNOCK OUTS	<input type="checkbox"/>
PLAN READING	<input type="checkbox"/>	PIPE WRENCHES	<input type="checkbox"/>
ADMINISTRATIVE DUTIES	<input type="checkbox"/>	NAIL GUN	<input type="checkbox"/>
MANAGEMENT	<input type="checkbox"/>	WIRE STRIPPERS	<input type="checkbox"/>
SPRAY PAINT	<input type="checkbox"/>	PLASMA TABLE	<input type="checkbox"/>
POWDER PAINT	<input type="checkbox"/>	BATCH OVEN	<input type="checkbox"/>
MATERIAL HANDLING	<input type="checkbox"/>	SAND BLASTING	<input type="checkbox"/>
LABELING	<input type="checkbox"/>	WASH BAY	<input type="checkbox"/>
WIRE MARKING	<input type="checkbox"/>	BAND SAW	<input type="checkbox"/>
MACHINING	<input type="checkbox"/>	DRILL PRESS	<input type="checkbox"/>
JIG BUILDING	<input type="checkbox"/>	TAP AND DIE	<input type="checkbox"/>
GENERAL CONSTRUCTION	<input type="checkbox"/>	LATHE	<input type="checkbox"/>
CONCRETE	<input type="checkbox"/>	CNC MACHINE	<input type="checkbox"/>