



3624 Lee Street, Alexandria, LA 71302
Phone: 318-473-9575 Fax: 318-767-1972

Application for Employment

PLEASE PRINT

Position Applied For Date

Referral Source [] Advertisement [] Employee [] Relative [] Government Employment Agency
[] Walk-in [] Private Employment Agency [] Other

Name of source (if applicable)

Name Last First Middle

Address Birth Date

City, State & Zip Social Security Number

Telephone Number If necessary, best time to call you at home is

May we contact you at work? If yes, work number and best time to call

If you are under 18 years old, can you furnish a work permit?

Are you eligible for employment in this country (proof of citizenship will be required upon employment)?

Date available for work

Type of employment desired: [] Full Time [] Part Time [] Temporary [] Seasonal

Are you on lay-off and subject to recall? [] Yes [] No

Will you relocate if job requires it? [] Yes [] No

Will you travel if job requires it? [] Yes [] No

Are you able to meet the attendance requirements of the position? [] Yes [] No

Will you work overtime if required? [] Yes [] No

Have you ever been bonded? [] Yes [] No

Have you been convicted of a felony in the last seven (7) years? [] Yes [] No

(Such convictions may be relevant if job related, but does not bar you from employment.)

If YES, please explain:

CDL Driver's License number (if required for job) State

Do you have experience driving the following: [] Boom Truck [] Moffet Forklift

List any driving tickets received in the past 3 years:

Employment History

List your last four (4) employers, starting with the most recent, including military experience. Explain any gaps in employment in comment section below.

Employer	From _____ To _____ Dates Employed	Summarize below the nature of the work performed & job responsibilities
Address including city, state & zip	\$ _____ Per _____ Starting Rate/Salary	
Job Title	\$ _____ Per _____ Final Rate/Salary	
Immediate Supervisor and Title	Reason for leaving	
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later		

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Comments:

Skills & Qualifications: Summarize special skills and qualifications acquired from employment or other experiences that may qualify you to work with our company.

Educational Background

List last three (3) schools attended, starting with the last one. List number of years completed. Indicate degree or diploma earned, if any, grade point average or class rank, and major and minor fields of study (if applicable).

School	# Years complete	Degree/Diploma	GPA/Class Rank	Major/Minor

References

List name and telephone number of three business/work references that are not related to you and are not previous supervisors. If not applicable, list three schools or personal references that are not related to you.

Name	Phone Number	Years Known
_____	_____	_____
_____	_____	_____
_____	_____	_____

List professional, trade, business, or civic associations and any offices held. (Exclude memberships which reveal sex, race, religion, national origin, age, color, disability or other protected status.)

Organization	Office(s) Held
_____	_____
_____	_____
_____	_____

List special accomplishments, publications, awards. (Exclude information which reveals sex, race, religion, national origin, age, color, disability or other protected status.)

List any additional information you would like us to consider.

For Personnel Department Use Only

Position applied for _____

Other positions considered for _____

Hired: Yes No Date of Hire _____

Position _____ Starting Hourly Rate/Salary _____

Classification: Warehouse Sheet Metal Shop Driver Sales DW Stacker Gen. & Admin.

Notes: _____

Completed by: _____ Date: _____

It is understood and agreed upon that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed.

I give the employer the right to investigate all references and to secure additional information about me through a background check. I hereby release from liability the employer and its representatives for seeking such information and all other persons, corporations, or organization for furnishing such information.

The employer is an Equal Opportunity Employer. The employer does not discriminate in employment and no question on this application issued for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state, or federal law.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

I understand that all unpaid loans and/or advances will be deducted from my final payroll check. All equipment issued to me will be returned before receiving the final payroll check.

I understand that just as I am free to resign at any time, the employer reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the employer has the authority to make any assurances to the contrary.

Signature of Applicant _____ Date _____

I give the employer the right to request a Motor Vehicle Report (MVR) from the State to verify my driving record.

Signature of Applicant _____ Date _____