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## APPLICATION FOR EMPLOYMENT

LAST NAME	FIRST NAME	MIDDLE INIT	TAL P	HONE NUMBER
ADDRESS	CITY	STA	ATE	ZIPCODE
	PI	ERSONAL INFORMA	ΓΙΟΝ	
1. ARE YOU	18 YEARS OF AGE OR OL	DER? [] YES [] NO		
2. ARE YOU	EITHER A U.S. CITIZEN O	R AN ALIEN AUTHOR	RIZED TO WORK IN TI	HE U.S.? [] YES [] NO
3. HAVE YO	U EVER BEEN CONVICTE	D OF A FELONY? []	YES [] NO	
IF YES	, please explain (a YES answ	ver does not necessarily n	nean that employment w	ill be denied)
CAN YOU PERFORI	M THE ESSENTIAL FUNCT V? [] YES [] NO	TIONS OF THE JOB WI	TH OR WITHOUT REA	ASONABLE
	F	EMPLOYMENT DESI	RED	
POSITION	DATE YOU CA	AN START	SALARY OR HO	OURLY RATE DESIRED
1. ARE YOU WILLI	NG TO WORK EVENINGS?	[] YES [] NO		
2. ARE YOU WILLIN	NG TO WORK WEEKENDS	? [] YES [] NO		
3. ARE YOU WILLI	NG TO WORK HOLIDAYS?	[] YES [] NO		
4. WOULD YOU LIK	E TO WORK [] FULL-TI	ME OR [] PART-TIN	Æ?	
	NY SPECIAL LICENSING ( ASE EXPLAIN	OR CERTIFICATION?	[] YES [] NO	
	EI	DUCATION OR TRAI	NING	
NAM	E OF SCHOOL CO	OURSE OF STUDY	YEARS COMPLETED	DID YOU GRADUATES
HIGH SCHOOL				
	raining) [] YES [] NO			

## EMPLOYMENT HISTORY

## PLEASE LIST PRESENT EMPLOYER FIRST

EMPLOYER	ADDRESS		PHONE NUMBER
JOB TITLE		SUPERVI	SOR
YEARS OF EMPLOYMENT	FROM	ТО	WORK PERFORMED
REASONS FOR LEAVING?	MAY WE C	ONTACT THIS	EMPLOYER? [] YES [] NO
EMPLOYER	ADDRESS		PHONE NUMBER
JOB TITLE	SUPERVISOR		
YEARS OF EMPLOYMENT	FROM	ТО	WORK PERFORMED
REASONS FOR LEAVING?	MAY WE	CONTACT TH	IIS EMPLOYER? [] YES [] NO
EMPLOYER	ADDRESS		PHONE NUMBER
JOB TITLE	SUPE	ERVISOR	
YEARS OF EMPLOYMENT	FROM	ТО	WORK PERFORMED
REASONS FOR LEAVING?	MAY WE	E CONTACT TH	HIS EMPLOYER? [] YES [] NO
I	OO YOU HAVE	EXPERIENC	CE IN THE FOLLOWING?
[ ] TRUCK DRIVING	[]TIRER	EPAIR	[ ] ROUTING EXPERIENCE
[ ] WELDING	[ ] CUSTOMER SERVICE [ ] BOBCAT OPERATIONS		
[ ] TRUCK MAINTENANCE	[] METAL	PREP & PAI	NTING [] ROLL OFFS
WHAT SPECIFIC ATTRIBUTES	QUALIFY YOU	FOR THIS JC	<b>DB</b> ?
			REFERENCES
			WHOM YOU HAVE KNOWN FOR AT LEAST ONE YEAR.
NAME ADDRE		BUSINESS	YEARS ACQUAINTED PHONE NUMBER
1			
2			